NO. _____ **WO#: _____** **DATE: _____**

SERVICE ADDRESS: _____ SERVICE DATE: _____

LOT NUMBER: _____ BLOCK NUMBER : _____

SUBDIVISION: _____

APPLICATION REQUESTED BY: _____

ADDRESS: _____

CITY : _____ STATE: _____ ZIP: _____

PHONE NUMBER: _____ FAX: _____

TYPE OF SERVICE:

☐ **Overhead** ☐ **Temporary** ☐ **Subdivision**

☐ **Underground** ☐ **Permanent** ☐ **New Customer**

☐ **Service Upgrade** **Present entrance is _____Volts,_____Wire, _____Phase, _____Amps**

Show added load on "Connected Load" chart.

CLASS OF SERVICE:

☐ **City Residential** ☐ **All Electric** ☐ **Space Heating**

☐ **Rural Residential** ☐ **Commercial** ☐ **Large Power**

Number of Services: _____

COMMERCIAL LOAD STATEMENT:

VOLTS: _____
NO. PHASES: _____
NO. WIRES: _____
AMPS: _____

CONNECTED PEAK LOAD: _____

SECONDARY MAIN SIZE: _____

CONNECTED LOADS: EST. ACTUAL Kw

INTERIOR LIGHTING: _____
EXTERIOR LIGHTING: _____
A/C: _____
ELECTRIC HEAT: _____
MOTORS TOTAL HP: _____
LARGEST MOTOR HP: _____

BILLING INFORMATION:

BILL TO: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

FEE PAYMENT: Cash_____ Check#_____ DATE PAID:_____ PAID BY:_____