



Application for Easements (check one):	OH (jointly owned or solely owned)	UG
	Pad mount Transformer only	URD
Utility Engineer's Name:	Telephone Number:	

Property Owner(s):

Please complete ALL of the sections below so that we may prepare an easement for your signature. Do not leave any sections unanswered. If a section does not apply to you simply put "n/a" on the line. Incorrect or incomplete information will delay service installation.

Property Owner Information	Property Address of Easement
Address:	Address:
City:	City:
State:	State:
Zip:	Zip:

Customer Contact Person:

Daytime Phone(s):

Re: Subdivision Title:

1. Provide us with a RECORDED copy of the present owner's deed. Book Page
- a) If multiple deeds make up the whole parcel, please include all deeds.
 - b) If registered land please include a copy of the Land Court Certificate of Title.
 - c) If the Property Owner is a c1) CORPORATION, c2) TRUST, c3) PARTNERSHIP, or c4) LIMITED LIABILITY COMPANY, provide the following which is applicable:

c1) President's Name: and Treas.'s Name:



EASEMENT APPLICATION FORM

See Footnote Below

Or

Vice President:

and Asst. Treas.:

1 If neither "Name Combination" is available, the person(s) signing the easement must have a corporate vote authorizing them to sign on behalf of the Corporation.

c2) Trust: No. Of Trustees: Name(s):

Name of Trust:

c3) Partnership: No. Of Partners: Name(s):

c4) LLC: Authorization to Sign: Name(s):

2. Provide us with an approved: "Definitive Subdivision Plan"

Plan Book: Plan: Dated:

a) If there is no recorded subdivision plan please include the following information:

Assessor's Map: Block: and Lot:

3. Is your property mortgaged (circle one)? YES NO If "YES", please complete this section:

a) Name of Bank/Company/Person holding mortgage(s):

b) Address of mortgage holder(s):

c) Date and recording information of mortgage(s):

Date: County Recorded: Book: Page:

Additional Comments:

Please contact your local operations center if you have questions on this form.