



Need Date:

Customer Information:		Project Information:	
Customer Name		Work Request No.	
Premise Address		Service Method (OH/UG)	
City, State, Zip		Type (New, Upgrade, Temp)	
Electric Bill Mailing Address		Main Switch (amps)	
City, State, Zip		Voltage	# of phases
Date of Birth		Existing Meter #	
Driver's License No.		Rate	Account Number
Customer Phone		Loc Class (NonHeat or Heat)	
Customer Email		Notes:	
Contractor Information:			
Contractor/Electrician Name			
Contractor/Electrician Phone			
Contractor/Electrician Email			
Coordinator Use Only:			
Peak Demand Load:		Meter Sockets Labeled:	
CT/PT Metering Required:			
Line or Meter Dept. to Set Meter:		Manual Bypass Lever Required:	
Operations Coordinator Name		Phone	Date

