

REQUEST FOR SERVICE NEWNAN UTILITIES COMMERCIAL OR SINGLE RESIDENTIAL

Customer Name			Date	E-Mail																																																																	
Location of Service			Phone #	Fax #																																																																	
Account Number	Total Electric Yes <input type="checkbox"/> No <input type="checkbox"/>		<input type="checkbox"/> Existing Customer	Square Feet	Type of Business																																																																
<input type="checkbox"/> New Customer			Loads Expressed In kW																																																																		
Newnan Utilities Engineer/Designer			<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;">DESCRIPTION</th> <th style="width:10%;">1 PHASE</th> <th style="width:10%;">3 PHASE</th> <th style="width:20%;">TOTAL kW</th> </tr> </thead> <tbody> <tr><td>Interior lights</td><td></td><td></td><td style="text-align:right">kW</td></tr> <tr><td>Exterior lights</td><td></td><td></td><td style="text-align:right">kW</td></tr> <tr><td>Kitchen Equipment No Refrigeration</td><td></td><td></td><td style="text-align:right">kW</td></tr> <tr><td>Air Conditioning</td><td></td><td></td><td style="text-align:right">kW</td></tr> <tr><td>Air Handling Not AC or Heat</td><td></td><td></td><td style="text-align:right">kW</td></tr> <tr><td>Number of AC or Heat units</td><td></td><td></td><td></td></tr> <tr><td>Refrigeration</td><td></td><td></td><td style="text-align:right">kW</td></tr> <tr><td>Heat Pumps</td><td></td><td></td><td style="text-align:right">kW</td></tr> <tr><td>Receptacles</td><td></td><td></td><td style="text-align:right">kW</td></tr> <tr><td>Motors Stand Alone</td><td></td><td></td><td style="text-align:right">kW</td></tr> <tr><td>Misc. Power</td><td></td><td></td><td style="text-align:right">kW</td></tr> <tr><td>Water Heating</td><td></td><td></td><td style="text-align:right">kW</td></tr> <tr><td>Space Heaters</td><td></td><td></td><td style="text-align:right">kW</td></tr> <tr><td colspan="3" style="text-align:right">TOTAL CONNECTED LOAD</td><td style="text-align:right">kW</td></tr> <tr><td colspan="3">Largest motor</td><td style="text-align:right">hp</td></tr> </tbody> </table>			DESCRIPTION	1 PHASE	3 PHASE	TOTAL kW	Interior lights			kW	Exterior lights			kW	Kitchen Equipment No Refrigeration			kW	Air Conditioning			kW	Air Handling Not AC or Heat			kW	Number of AC or Heat units				Refrigeration			kW	Heat Pumps			kW	Receptacles			kW	Motors Stand Alone			kW	Misc. Power			kW	Water Heating			kW	Space Heaters			kW	TOTAL CONNECTED LOAD			kW	Largest motor			hp
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DESIRED SERVICE CHARACTERISTICS																																																																					
SECONDARY SERVICE TO BE INSTALLED BY:																																																																					
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SERVICE SIZE: _____		Customer <input type="checkbox"/>																																																																			
Overhead <input type="checkbox"/>		Utilities <input type="checkbox"/>																																																																			
Pad mount <input type="checkbox"/>																																																																					
Overhead/Underground <input type="checkbox"/>																																																																					
Primary <input type="checkbox"/> 1 p = _____ A @ _____ %PF																																																																					
1 s = _____ A @ _____ %PF																																																																					
Volts	Phase	Wire																																																																			
Service Entrance AMPS	Estimated Service Date																																																																				
Plot Plan Provided	Primary Voltage 7200 kV																																																																				
Confirmation of Service <input type="checkbox"/> Fault Currents <input type="checkbox"/>																																																																					
To: Name																																																																					
Address																																																																					

(FOR NEWNAN UTILITIES USE ONLY)

CONTRACT/REVENUE INFORMATION		DEMANDS (kW)		
		EXISTING	ADDITIONAL	TOTAL
ADDED REVENUE	RATE	Summer		
		Winter		
kW MINIMUM	ANNUAL kWh	Future kW Anticipated: Yes <input type="checkbox"/> No <input type="checkbox"/> _____ kW		
CONTRACT REQUIRED: YES <input type="checkbox"/> NO <input type="checkbox"/>		METERING		
CONTRACT EXECUTED: YES <input type="checkbox"/> NO <input type="checkbox"/>		Meter Location: Pad <input type="checkbox"/> Bldg. <input type="checkbox"/> Other <input type="checkbox"/> _____		
REMARKS:		Meter Type _____		
		CT Quantity, Size, Type _____		
		CT Mounting Arrangement _____		
		Date Metering Info Sent _____		