

City of



Dover

COMMERCIAL AND INDUSTRIAL ELECTRICAL LOAD SHEET

NAME OF CUSTOMER OR BUSINESS _____

ADDRESS OR LOCATION OF SITE _____

CHECK ALL THAT APPLY:

New Service ()	Addition to Existing Service ()
Primary Metering ()	Secondary Metering ()
Overhead Service ()	Underground Service ()

COMPLETE ALL OF THE FOLLOWING:

Entrance Size: _____ AMP _____ Voltage _____ Phase _____ Wire (Wye/Delta)
 Wire Size: _____ No. of Runs (circle Aluminum or Copper)
 Conduit Size: _____ No. of Runs

COMPLETE ALL OF THE FOLLOWING: (please circle Gas or Electric)

Heat (Gas or Electric)	_____ KW	_____ V	_____ Phase	_____ Amp
Air Conditioning	_____ KW	_____ V	_____ Phase	_____ Amp
Lighting	_____ KW	_____ V	_____ Phase	_____ Amp
Water Heater (Gas or Electric)	_____ KW	_____ V	_____ Phase	_____ Amp
Receptacles	_____ KW	_____ V	_____ Phase	_____ Amp
Motor Loads - Single Phase	_____ KW	_____ V	_____ Phase	_____ Amp
Motor Loads -Three Phase	_____ KW	_____ V	_____ Phase	_____ Amp

TOTAL CONNECT AMP: _____

PROVIDE INFORMATION ON OTHER CRITICAL ELECTRIC EQUIPMENT:

PROVIDE THE FOLLOWING INFORMATION:

Date Service Will Be Needed: _____
 Electrical Contractor: _____ (Phone No.)
 Electrical Consultant: _____ (Phone No.)

FORM MUST BE FILLED OUT COMPLETELY. INDICATE ITEMS THAT DO NOT APPLY WITH "N/A". DIRECT ANY QUESTIONS TO THE ELECTRIC ENGINEERING DEPARTMENT AT (302) 736-7091.