

**(9-0-1 Form)**

**Project Name (& phase if applicable):** \_\_\_\_\_

**Request is for:** →  Information Only  Electric Service Extension

**Project Address:** \_\_\_\_\_

**\*\* Re: Utility Account Number:** \_\_\_\_\_

Lot #: \_\_\_\_\_ Block #: \_\_\_\_\_ Parcel #: \_\_\_\_\_

**Type of Service:**

- Commercial Building
- Industrial Park or Facility
- Retail Center or Building
- Residential Subdivision
- One Unit Residential
- Multi Unit Residential
- Other: \_\_\_\_\_

Project Engineer or Architect: \_\_\_\_\_

Engineering/Architectural Firm: \_\_\_\_\_

Telephone: (\_\_\_\_\_) - \_\_\_\_\_

Customer Name: \_\_\_\_\_

Customer Telephone: (\_\_\_\_) - \_\_\_\_\_

Number of Meter Bases: \_\_\_\_\_

**Service Data:**

Main Breaker Size: \_\_\_\_\_ Amps Service Voltage: \_\_\_\_\_ Volts

Number of Phases (1 or 3): \_\_\_\_\_

Phase Conductor(s): \_\_\_\_\_ Size, \_\_\_\_\_ Quantity, \_\_\_\_\_ Material (Cu or Al)

Neutral Conductor(s): \_\_\_\_\_ Size, \_\_\_\_\_ Quantity, \_\_\_\_\_ Material (Cu or Al)

Secondary Service Distance (from meter to transformer): \_\_\_\_\_ Feet

Underground Requested

Number of Conduits: \_\_\_\_\_ Total

Conduit Size: \_\_\_\_\_

Number of Conductors per

Conduit: \_\_\_\_\_

Overhead Requested

Type of Mechanical Attachment to the Building or Structure:

Insulated House Knob

Eye Bolt

Other: \_\_\_\_\_

**Electric Load Data:**

\_\_\_\_\_ KW, Expected Peak Demand (A) (used for contract demand and transformer size)

\_\_\_\_\_ KW, Total Connected Load (sum of power used, calculated from list below)(B)

\_\_\_\_\_ Diversity Factor Expected (example 70%)(A/B)

\_\_\_\_\_ Amp Heat Pump – Compressor

\_\_\_\_\_ KW Heat Pump - Strip Heat

\_\_\_\_\_ Ton Air Conditioning (not Heat Pump)

\_\_\_\_\_ KW Resistance Heat (not Heat Pump)

\_\_\_\_\_ KW Air Handling (not Heat Pump)

\_\_\_\_\_ KW Lighting Load

\_\_\_\_\_ KW Receptacles

\_\_\_\_\_ KW Miscellaneous

\_\_\_\_\_ Hp Manufacturing Load

\_\_\_\_\_ Hp Largest motor, \_\_\_\_\_ Phase

\_\_\_\_\_ Amp Welders (Max), \_\_\_\_\_ Phase

\_\_\_\_\_ KW Refrigeration Load

\_\_\_\_\_ KW Water Heating Load

\_\_\_\_\_ KW Cooking Load

\_\_\_\_\_ KW Future Load

Additional Comments or Equipment requiring Special Attention: \_\_\_\_\_

**Permanent Service Date:** \_\_\_\_\_

**Temporary Service Date:** \_\_\_\_\_

Note: Please contact Community Development to submit drawings and plans.

**Return Completed Document to:**

City of Oak Ridge Electric Department

P.O. Box 1

Oak Ridge, TN 37831-0001

**Submitted By:**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**----- DO NOT WRITE BELOW THIS LINE -----**

Contract Required:  YES  NO

Contract Demand: \_\_\_\_\_ kW

Calculated Deposit: \$ \_\_\_\_\_

Staff Comments: \_\_\_\_\_

Copy to UBO

**\*\* -For office use only, customer does not fill out.**