

REQUEST FOR INFORMATION

NEW ELECTRIC SERVICE – NON RESIDENTIAL USE

Your electric service request will be processed after this form is completed in its entirety and returned to Claverack REC. Timely completion of this form will avoid delay in providing service.

	С	USTOMER INFORM	MATION				
Member Name:			Phone #:				
Email Address:			Fax #:				
Service Address:							
City:	Zip:	Township:	Cou	nty:			
Mailing/Billing Address:							
City:	State:	Zip:					
DATE PERMANENT SERVICE I: after review of this project.)	S REQUESTED:_	(this date will be discussed with you					
	PROJ	ECT CONTACT INF	ORMATION				
Electrical Contractor:			Phone #:				
Address:			Cell #:				
Email Address:			Fax #:				
Architect:			Phone #:				
Address:			Cell #:				
Email Address:		Fax #:					
	REQU	ESTED SERVICE IN	FORMATION				
1-Phase, 120/240 VOLT, 3-WIRE			3-Phase, 277/480 VOLT, 4-WIRE				
3-Phase, 120/208 VOLT, 4-WIRE			OTHER:				
3-Phase, 120/240 VO	LT, 4-WIRE						
New Service Size – AMPS:							
Nearest Claverack REC Pole #	: <u></u>						
Do existing Claverack REC fac	ilities need to b	be moved to accom	nmodate this project?	Yes	No		
Description of facilities to be	moved (charge	s may apply):					

CONNECTED ELECTRICAL LOAD

Our facilities will be designed based on the load information provided; therefore, accuracy is essential. Please indicate connected loads in terms of kW, HP, and Tons.

Lighting: Indoor:	kW	Process He	ating:	kW
Outdoor:	kW	Refrigerati	kW	
1-Phase Motors (excludes HVAC):	HP	Space Heat	kW	
1-Phase Miscellaneous:	kW	Air Conditi	Tons	
3-Phase Motors (excludes HVAC):	HP	Welders:	kW	
*3-Phase Miscellaneous:	kW	Cooking:		kW
*Specify Equipment & Type Below:		Water Hea	kW	
		D (Including I		
		R (Including I	-	
Largest Motor:			REC may specify t	
NEMA CODE:		# Starts/Ho	our:	or Day:
Starting:Across the	Reduced voltage at%			
Description of equipment the motor drive	!S:			
Do motors operate simultaneously?	Yes	No		
Note: Please ensure all HP motor load is	included in	connected el	ectrical load abov	ve.
**Reduced voltage/soft start required for than 15 HP.	all 1-Phase	motors greate	er than 7.5 HP and	d all 3-Phase motors greater
Submitted By (Please Print):			Date:	
Title:			Fax #:	
Completed forms must be returned to Cla	averack REC	:		
USPS – Mail to:			Fax to:	(570) 265-5060
Claverack REC Attention: Engineering Dept			Email:	mail@claverack.com
32750 Route 6				
Wysox, PA 18854				

Page 4