

APPLICATION FOR ELECTRIC SERVICE & METER

COMPLETE AND RETURN TO: CITY OF NEWARK-ELECTRIC DEPT – PO BOX 390 – NEWARK, DE 19715

ALL WORK MUST COMPLY WITH CITY OF NEWARK SYSTEMS SERVICE REQUIREMENTS AND BE INSPECTED BY AN APPROVED INSPECTION AGENCY

THE CITY RESERVES THE RIGHT TO CANCEL THIS REPLY WITHOUT FURTHER NOTICE IF NO FURTHER COMMUNICATION IS RECEIVED FROM REQUESTER WITHIN 90 DAYS OF ISSUE DATE

PLEASE PRINT

SEND REPLY TO:		DATE:		TYPE OF REQUEST:	
ELECTRICIAN'S OR BUILDER'S NAME		DE LICENSE #		☐ New Service ☐ Temporary Service ☐ Service Relocation	
ADDRESS		ZIP		☐ Upgrade/Changes ☐ Reintroduction ☐ Other _____	
TELE.#	FAX#	BLDG PERMIT#		TYPE OF SERVICE:	
CUSTOMER'S NAME				☐ RESIDENTIAL ☐ COMMERCIAL	
ADDRESS TO BE SERVED		ZIP		☐ Single House ☐ Apartment ☐ Duplex ☐ Town House ☐ Modular Home ☐ Other _____	
# UTILITY POLE	SUBDIVISION/DEVELOPMENT	LOT#		☐ Store ☐ Office ☐ Industrial ☐ Restaurant ☐ Warehouse ☐ Other _____	
CURRENT CONSTRUCTION STATUS:				Area of Building Sq. Ft.	
☐ Not Started- Date work to start: ____/____/____ ☐ In Progress ☐ Completed Approximate Date Service Requested: ____/____/____				SERVICE: AMPS VOLTS WIRE PHASE	
CUSTOMER COMMENTS:				AERIAL ☐ UNDERGROUND ☐	
				Secondary conductor size Neutral size # of runs	
				METER INFO: ☐ Single Meter Required ☐ Multiple Meters Total No. _____	
				HEATING/AIR CONDITIONING: ☐ Heat Pump _____ tons ☐ Central Air _____ Tons ☐ Resistance Aux heat _____ kW ☐ Natural Gas ☐ Propane ☐ Other _____	
				CHARACTERISTICS OF NEW OR ADDITIONAL LOAD:	
				ELECTRICAL LOAD kW LARGEST MOTOR SPECS:	
				Heating _____ Quantity _____	
				Cooling _____ Size (HP) _____	
				Lighting _____ Locked Rotor _____	
				Elevators _____ Current _____	
				Other Motors _____ Motor Code Letter _____	
				Water Heating _____ Phase _____	
				Cooking _____ Voltage _____	
				Miscellaneous _____ Freq of Start (per hr) _____	
				Existing Load _____ Purpose _____	
				Total Conn. Load _____	
				Est. Total Demand _____	
				Operating Hours/day _____ Days/week _____	
CITY OF NEWARK COMMENTS:				How close is the nearest power line from project? _____ ft. Type: ☐ Overhead ☐ Underground	
				Will existing facilities require relocation? ☐ Yes ☐ No	
				Describe: _____	

I affirm that the above information is correct to the best of my knowledge. I understand that any changes I make in the above information or attached drawings may increase the time required for the City of Newark to provide service, and that I might be liable for additional engineering and construction costs.					
Customer Signature _____ Date _____					
Customer Information:					
1. Not all service voltages are available in all areas. Before purchasing electrical equipment or proceeding with any wiring, information regarding service availability and meter location should be reviewed with the City of Newark.					
2. All work requiring an electrical inspection requires a building permit from the City of Newark.					
3. Rigid steel risers and bonding bushings required on all underground services.					
4. Padmount transformers can have no more than six conductors per phase for secondary services.					
5. The City will supply connectors and crimp tool to reconnect aerial upgraded residential services.					
6. The customer must supply City approved connectors for aerial commercial services.					
NEW SERVICE WILL TERMINATE AT PRESENT TERMINATION ☐					
METERS WILL BE INSTALLED AT PRESENT LOCATION ☐ FLOOR					
INDOOR ☐ OUTDOOR ☐ ON _____ WALL _____ FEET FROM _____ WALL _____ FEET ABOVE GROUND LEVEL					
JOB #	PREPARED BY:	TEL#	ISSUE DATE		

Fig. 1

Enclosure: __ Site Plans __ Single Line Diagram