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SO _____

SrvLoc _____

Cust# _____ AFC

APPLICATION FOR NEW NON-RESIDENTIAL ELECTRICAL SERVICE

This application must be filled out completely to ensure line extension costs are tabulated accurately. Applications may be mailed to the Service Engineering Department, Mason PUD 3, P.O. Box 2148, Shelton, WA 98584 Please include the appropriate application fee. Applications may also be submitted via email at serviceengineering@masonpud3.org Or in person at the following locations: 2621 E Johns Prairie Road, 310 W Cota Street in Shelton, or the PUD 3 office located in Belfair at 24081 East Hwy 3 Ste B. Questions regarding this application? Please call us at (360) 426-0888 or email us at serviceengineering@masonpud3.org.

APPLICATION FEES

Single Phase Service \$100.00 - Single Phase Development \$250.00 - Three Phase Service \$500.00

***NOTE* Application Fees are not refundable**

Customer Information:

Organization/Business Name _____ Work # _____

Contact Person _____ Work # _____ Cell # _____

E-Mail address _____

Mailing Address _____ City _____ State _____ Zip Code _____

Electrical Contractor/Builder _____ Phone # _____
(contact person)

Do you give permission to PUD 3 to provide information regarding your request for service to your contractor/electrician/agent?
Please initial yes or no. Yes _____ No _____

Load Information: Requested Voltage Single Phase 120/240 Three Phase 120/208 277/480

Type of Operation _____ Building size _____ Square Feet Panel size _____ Amps

The following electric equipment is planned to be in use within (6) months of completion of the power line project.

Please attach a panel schedule.

<u>KW load to be connected:</u>	<u>Single Phase</u>	<u>Three Phase</u>			<u>Hours Equipment Operated Per</u>
<u>Day</u>					
Heating	_____	_____			_____
Lighting	_____	_____			_____
Outlets	_____	_____			_____
Cooking	_____	_____			_____
Water Heating	_____	_____			_____
Air Conditioning	_____	_____			_____
<u>All Motors (HP)</u>			<u>Running</u>	<u>Locked Rotor</u>	
_____	_____	_____	<u>Amps</u>	<u>Starting Amps</u>	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

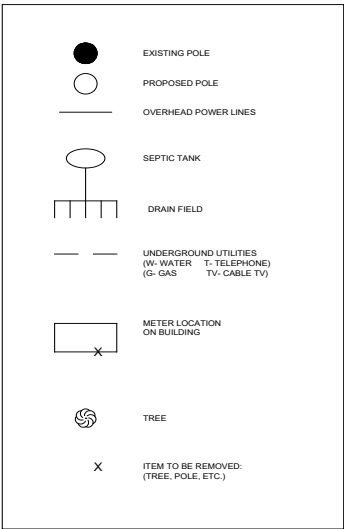
Total HP Operated Simultaneous _____ Total HP Started _____ Estimated Days of Operation per year _____

PUD 3 requires the customer's electric panel to be load balanced, otherwise unnecessary capacity and subsequent extra charges may be incurred by the customer. PUD 3 must be informed of any changes to the above information as additional charges may be assessed.

Site Information:

New Service Address _____ Parcel # _____

Would you like to meet with a PUD 3 service engineer at the site? Yes No



Please make a sketch of your service location showing the following Items:

- Boundaries of tract
- Location of meter base (including temporary service)
- Location of septic tank (existing and proposed)
- Location of existing underground utilities
- Location and length of buried underground secondary service wire and size of wire
- Location and orientation of buildings or structures
- Location of poles (existing and proposed)
- Location of roadways, driveways and clearings (existing and proposed)

Additional Information:

Permanent Service:

- Overhead Underground

Temporary Service: Yes No **NOTE: Temporary service will be disconnected upon connection of permanent service.**

- Overhead Underground

(Not Required to Submit Application):

Building Permit# _____ **State Electrical Work Permit #** _____ **Date Approved** _____

Additional remarks (including any future load requirements): _____

I affirm that the above information is correct to the best of my knowledge, and that I have been provided with PUD 3's Line Extension Policy, Service Rules and Regulations, and Customer Information Package. I understand that changes I make in the above information or attached drawings may increase the time required for PUD 3 to provide service and may be subject to a revision fee.

Signature

Date

For Official Use Only:					
Date Received:	By:	Assigned To:	Date:		
Primary <input type="checkbox"/> Overhead <input type="checkbox"/> Underground <input type="checkbox"/>	Field Check Date:	Rate Schedule:	Est. KVA Peak:		
Check #:	Receipt #	Credit Approval:	OK#:	Date:	
Available secondary fault current: Single Phase / Three Phase:		SN:	for:	volts:	KVA transformer size:
Motor starter required for 10 HP single phase or 25 HP three phase % voltage drop			reduce voltage starter required		
Engineer's Notes:					