

REQUEST FOR ELECTRICAL SERVICE

ALECTRA UTILITIES PROJECT # _____

GENERAL INFORMATION

Project: APARTMENT COMMERCIAL INDUSTRIAL
Project Title: _____
Location: _____
Owner's Name: _____ TEL# _____ EMAIL _____
Owner's Mailing Address: _____
Site Supervisor: _____ TEL# _____ EMAIL _____
Electrical Contractor: _____ TEL# _____ EMAIL _____

SERVICE REQUIREMENTS

NEW CHANGE

Proposed use for the Facility: _____
Total Building Area: _____ (m²) or (ft²)
Size of New Service: _____ Volts, _____ Amps, _____ Phase, _____ Wire
Secondary Cable Size: _____ Runs Of _____
Load (Estimated): Connected _____ kW Demand _____ kW
(Detailed load calculations to be submitted if service exceeds 200A)
****If Customer Owned Transformer please indicate the size:** _____ kVA

METERING REQUIREMENTS

PRIMARY SECONDARY BULK

Main Service Switch: SWITCHGEAR FUSED DISCONNECT
Individually Metered Units: _____ & _____ Amps each, _____ & _____ Amps each, _____ & _____ Amps each

*A copy of the shop drawing of the switchgear or the service layout (main breaker, splitter bus and metering cabinets) is required prior to meter installation. *

Before Alectra Utilities, formerly Guelph Hydro will commence the design process including estimating servicing charges and allocating materials for this project, **this form is to be completed and returned to Alectra Utilities with a site plan including the proposed transformer location, load calculations, an electrical single line diagram and details of the electrical room.**

Requested in-service date: _____ Please allow approximately four weeks for scheduling after all conditions are met by customer (i.e.: civil work, signature, prepayment, ESA Approval, etc.) for Alectra Utilities to install the electrical supply to the project.

REQUESTED BY: _____ **AUTHORIZED SIGNATURE:** _____

DATE: _____

RETURN TO: Alectra Utilities
 395 Southgate Drive
 Guelph, ON N1G 4Y1
 C/O ICI & Layouts
 Brendan.McGregor@alectrautilities.com