

ELECTRICAL LOAD DATA

RETURN TO: engineering@srelectric.com

Date: _____

ATTN: ENGINEERING

RE:

(Name of Facility Requiring Electrical Service)

(Address or Location of Facility Requiring Electrical Service)

Attached is a copy of the site plan for the above facility with the desired electrical service entrance location identified. We anticipate that temporary electrical service will be needed on _____, 20_____, and that permanent electrical service will be needed on _____, 20_____.

This data is: NEW REVISED

Requested Voltage Delivery: <input type="checkbox"/> 120/240 Volts, single phase, 3-wire <input type="checkbox"/> 120/240 Volts, three phase, 4-wire, Delta <input type="checkbox"/> 120/208 Volts, three phase, 4-wire, Wye <input type="checkbox"/> 277/480 Volts, three phase, 4-wire, Wye <input type="checkbox"/> Other	Service Entrance: Ampacity _____ Amperes Number of conduits _____ Conduit Size _____ Number of conductors per phase _____ Size _____ Neutral conductor size _____ Service: OH <input type="checkbox"/> / UG <input type="checkbox"/> / UG from pad XFMR <input type="checkbox"/>
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to service the following NEW or ADDITIONAL connected loads:

SINGLE PHASE	THREE PHASE	
		KW Space Heating for: <input type="checkbox"/> Heat Pump <input type="checkbox"/> Resistance <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Other
		KW Space Cooling & Ventilation, Cooling _____ Tons
		KW Electric Vehicle Charging
		KW Lighting
		KW Water Heating
		KW Cooking
		KW Welding
		KW Other _____
		Misc. _____

Largest Motor:
 _____ **FLA** _____ **Volts** _____ **Phase**
If A/C, compressor: _____ **LRA**
If other motor: _____) _____ **HP**
 _____ **code letter** _____ **starts / hr**

The facility has _____ sq. ft. of floor area, of which _____ sq. ft. is comfort heated.

Electrician Name: _____ Address: _____

Phone w/Area Code: _____

Signed: _____