

Electrical Load Data Sheet

For office use:
 BGEnergy Rep: _____
 District: _____
 W/O #: _____
 XFMR: _____

 Name of facility requiring electrical service () Phone

 Address

Please attach a copy of the site plan for the above facility with the desired electrical service entrance location identified.

Temporary electrical service will be needed on _____ Date

Permanent electrical service will be needed on _____ Date

Voltage

- ___ 120/240v single-phase
- ___ 120/240v three-phase (overhead only)
- ___ 120/208v three-phase
- ___ 277/480v three-phase
- ___ 240/480v three-phase

Service Entrance

Ampacity: _____ amps
 # of conduits _____ Conduit size _____
 # of conductors per phase _____
 Size of conductors _____

Service Type

OH | UG | UG from pad XFMR

Single-phase

Three-phase

_____	_____	KW heating	___ heat pump	___ resistance	___ gas
_____	_____	KW cooling	___ tons		
_____	_____	KW lighting			
_____	_____	KW water heating			
_____	_____	KW cooking			
_____	_____	KW welding			
_____	_____	KW other	_____		

Largest Motor

___ FLA, ___ Volts, ___ Phase
 If air cond. compressor ___ LRA
 Other motors _____
 ___ code letter ___ starts/hours

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

Owner's representative: _____ () Phone
 Name

_____ Address

_____ Signature