

**C&I Requirements
Oncor Electric Delivery**

Date initiated: _____

Please Complete in Full and return to Project Manager - Authorized Representative: please sign and date form

Customer: Name: _____ Phone # _____ / _____ - _____ Cell # _____ / _____ - _____
Project Address: _____
Mailing Address: _____
General Contractor: Name: _____ Phone # _____ / _____ - _____ Cell # _____ / _____ - _____

Customer is responsible for providing, without cost to the company: 1) suitable space on Customer's premises for the installation and maintenance of the facilities; 2) rough site grading to final grade along the route of facilities and clearing of all obstructions; 3) exhibit for easement.

Site Plan/Survey: Please indicate on site plan/survey desired meter and transformer location
Requesting Voltage – 1phase 120/240, 3phase 120/208, 3phase 120/240, 3phase 277/480, 3phase 480, other _____
Main Breaker Rating in AMPS - _____
Square Footage of Structure _____ Number of Electric Meters requested _____
Desired Service type – Overhead _____ Underground _____ **GAS – Yes or No**

ELECTRIC LOAD REQUIREMENTS

HVAC LOAD Quantity _____ Phase _____ Tons _____ KW-Each _____
LIGHTING Quantity _____ Phase _____ KW-Each _____
MISCELLANEOUS LOAD Quantity _____ Phase _____ KW-Each _____
MOTOR > THAN 50 KW YES or NO

Transocket Delivery Information: # of conduits _____ # of conductors _____ Wire Size _____
Shipping address _____

TO BE COMPLETED BY COMPANY & INITIALED BY REPRESENTATIVE

Customer to provide all civil work _____ Initials
Customer to provide clearing of ROW _____ Initials
Customer to provide easement _____ Initials

Construction Time Frame Start by _____ Complete by _____

Cost estimate good for 30 days

Pursuant to the Company's Tariff for Retail Delivery Service, the extension length or cost of additional electric facilities is \$ _____ cost to customer. Customer Initials _____ Company Initials _____ Date: _____

Signature
(Customer)

Title

Phone

Date

Project Design Signature

Phone

Date