Northcentral Electric Cooperative™

Electrical Load Data Sheet
Please Attach Two Copies of Site Plan
This is not a request for service.

Facility Name: _____ Date: _____

Address: _____ City/State/Zip: _____

Directions: _____

Electric Service Data

Service Request Type: ☐ New Construction   ☐ Existing   ☐ Electric Overhead Conversion To Underground

Anticipated Service Date: _____   **Temporary Electric Service:** Yes ☐ No☐ (Need Date:_____)

Electric Service Type: ☐ Overhead ☐ Underground (Padmount Transformer)☐Underground (Pole Mount Transformer)

Entrance Size (Amps): _____A Conduit #/Dia.: _____/_____" Conductor #Sets/Size: _____/_____ (AWG/kcm)**

Metering Comments: _____

Facility Has a Total of _____ Sq-Ft of Floor Area On ___ Floors of Which _____ Sq-Ft Are Area Comfort Conditioned

Basement/Attic/Other Living Space Not Included Above: No ☐ Yes ☐   (_____ Sq-Ft Finished, _____ Sq-Ft Unfinished)

Facility Has _____ Tons of Cooling Capacity Using _____ Unit(s)   ** - Customer/Contractor to supply NEMA 2-Hole connectors for all commercial secondary/service cables in pad mounted transformers.

Voltage And Load Data

Requested Service Voltage/Type

	Available Service	
	OH	**UG**
☐ 120/240V 1-Phase, 3-wire	Yes	Yes
☐ 120/208V 1-Phase, 3-wire	Yes	Yes
☐ 120/208V 3-Phase, 4-wire	Yes	Yes
☐ 277/480V 3-Phase, 4-wire	Yes	Yes

Other_____

Based on your experience and load data, estimate what you believe the true total peak kW Demand will be _____ kW.

Connected Loads	**1-Phase kW**	**3-Phase kW**	**Office Use Only**
Space Heating	_____	_____	_____
A/C/Heat Pump	_____	_____	_____
Air Handlers	_____	_____	_____
Lighting	_____	_____	_____
Water Heating	_____	_____	_____
Cooking	_____	_____	_____
Refrigeration	_____	_____	_____
Welding*	_____	_____	_____
Misc/Receptacle	_____	_____	_____
Battery Chargers	_____	_____	_____
May Require Special Consideration			_____

Other (Motor) Loads/Freq of Use/Other Important Notes:

_____

_____

Data for the Largest Motor

HP: _____ Voltage: _____ Phase: _____
FLA: _____ LRA: _____
Reduced Voltage Starting: Yes ☐ No ☐
!!25HP and greater motors required to have reduced voltage starting!! _____

Contact Information

Responsible Party (sign below) Phone:_____   **Owner/Developer**   Phone:_____

Name: _____   Name: _____

Address: _____   Address: _____

City/State/Zip: _____   City/State/Zip: _____

Electrical Contractor   Phone:_____

Name: _____

Address: _____

Address: _____

Comments/Additional Information

Comments: _____

Submitted By: _____ Dated: _____