



Date: _____

Form TES: Application for Temporary Electric Service

Building Permit #: _____

Address: _____ Lot #: _____

Subdivision/Development: _____

Service Size: ___ Single Phase ___ Three Phase
100 AMP ___ 200 AMP ___ OTHER

Service Voltage: 120/240 277/480 120/208

Requirements:
Available Fault Current: _____ (3-Phase, Consult SPU)

Main Breaker AIC Rating: _____

Electrical Contractor Information:

Master License #: _____

Company: _____ Phone: _____ Contact Name: _____ Phone: _____

Home/Business Owner Information:

Name: _____ Phone: _____ Contact Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Builder/General Contractor Information:

Company: _____ Phone: _____ Contact Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Responsible Party Information:

Who is responsible for electric charges, if applicable? Home/Business Owner Builder/General Contractor

Who is responsible for energy costs during construction? Home/Business Owner Builder/General Contractor

AUTHORIZATION: I certify that I own or am an authorized representative of the person(s) who owns the property indicated on this application

Signature: _____ Date: _____