



Request for New Electrical Services Commercial Service

Engineering Department 503-815-8629

✍ REQUIRED INFORMATION

Applicant Information (Please print full, legal name or business name)			
✍ Temporary service: Owner's name and address or party responsible for temporary service billing?	Name:		
	Street:		
	City / State / ZIP:		
	Daytime Phone:	Cell Phone:	
✍ Permanent service: Owner's name and address or party responsible for permanent service billing?	Name:	<input type="checkbox"/> Same as above	
	Street:		
	City / State / ZIP:		
	Daytime Phone:	Cell Phone:	
Project Description			
✍ Temporary service?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Overhead <input type="checkbox"/> Underground	Date Desired:
✍ Permanent service?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Overhead <input type="checkbox"/> Underground	Date Desired:
Contractor Information			
✍ Name of contractor:			
Mailing address:	<input type="checkbox"/> Same as above		
City / State / ZIP:			
✍ Daytime phone number:			
Contact Information			
✍ Name of contact:			Role:
Mailing address:	<input type="checkbox"/> Same as above		
City / State / ZIP:			
✍ Telephone Numbers:	Daytime Phone:	Cell Phone:	
Project Information			
✍ Street address and city OR assessor's parcel number:	(EXAMPLE: 2N 10 29AC 1400)		
✍ Nearest cross street:			
✍ Who will trench, install conduit, and backfill?	<input type="checkbox"/> Applicant <input type="checkbox"/> Contractor		Name: <input type="text"/> Cell Phone: <input type="text"/>
✍ Trench services (check all that apply):	<input type="checkbox"/> Electric <input type="checkbox"/> Telephone <input type="checkbox"/> Cable <input type="checkbox"/> Other: <i>Water, propane, sewer, storm drains, gas, or oil facilities are not permitted in joint trench.</i>		
Electrical Load Information			
✍ Main breaker size:	amps (✍ COMPLETE ATTACHED LOAD SUMMARY)		
Total square footage:	square feet		
✍ Voltage (select one):	<input type="checkbox"/> 120/240, 3-wire, 1Ø <input type="checkbox"/> 277/480Y; 4-wire 3Ø <input type="checkbox"/> 120/208Y; 4-wire 3Ø <input type="checkbox"/> Other:		
Attachments			
✍ Provide a copy of the following documents: <ul style="list-style-type: none"> • Load summary sheet (attached). • County assessor's parcel map indicating site, easements, and rights-of-way. • Detailed plot plan (see reverse). 			
✍ Applicant's Signature:	✍ Date:		

MAIL COMPLETED FORM TO: PO BOX 433; TILLAMOOK, OR 97141
 FAX TO: 503-815-8648 EMAIL: engineering-requests@tpud.org

REQUEST NO.: _____

Tillamook PUD Plot Plan

Name:

Address:

Include roads, well, septic system, sidewalks, driveways, proposed future improvements, proposed location of electric meter. A copy of the site plan submitted to Tillamook County may be attached.



REQUEST NO.: _____

