

**BEDFORD RURAL ELECTRIC ENERGY LOAD REQUEST**

6 Enterprise Lane, PO Box 335, Bedford PA 15522

Phone number – (814) 623-5101 ext 3818 or 3824 Fax number – (814) 623-7983

Customer Name:	Building Owner or Occupant	Designer or General Contractor
Service Address:	Name:	
Address:	Address:	
Telephone #:	Telephone #:	
Contact Person:	Contact Person:	
Electrician:	General Contractor:	
Telephone #:	Telephone #:	
Cell Phone #	Cell Phone #	
(electrician or customer signature)		<b>Business use</b> <input type="checkbox"/> <b>Personal use</b> <input type="checkbox"/> (please check one)

**Building Data**

Date Service Needed:	Building Use:
New Service or Upgrade:	Operating Hours: _____ Per Week

**Electrical Data**

Service Size (Amps):	Desired Voltage: 120/240	120/208
	277/480	Other _____
		Description _____

Check One:

Single Phase	Underground	Polemount Transformer
Three Phase	Overhead	Padmount Transformer

**Electrical Loads (watts)**

Description	Single Phase	Three Phase	Total Load
Interior Lighting	_____ watts	_____ watts	_____ watts
Exterior Lighting	_____ watts	_____ watts	_____ watts
Cooling	_____ watts	_____ watts	_____ watts
Heating	_____ watts	_____ watts	_____ watts
Water Heating	_____ watts	_____ watts	_____ watts
*Motors	_____ watts	_____ watts	_____ watts
Office Equip.	_____ watts	_____ watts	_____ watts
Cooking Equip.	_____ watts	_____ watts	_____ watts
Refrigeration	_____ watts	_____ watts	_____ watts
Miscellaneous	_____ watts	_____ watts	_____ watts

**\*List Largest Motors (Over 10hp)**

Function	HP Rating	No. of Units	Comments:
1.			
2.			
3.			

**BEDFORD RURAL ELECTRIC USE ONLY BEYOND THIS POINT**

<b>TOTAL CONNECTED LOAD:</b>	<b>KW</b>	<b>KW</b>	<b>KW</b>
Business	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Rate Schedule _____
Who Staked the job	KVA Min. Charge _____		
Account #	KWh Mult _____		
Recommended Size of Transformer	KW Mult _____		
Type of Metering Recommended	read by _____		
Form # of Meter			
Map Location	(BREC Signature)		