

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

	Building Owner or Occupant	Designer or General Contractor
Customer Name:	_____	Name: _____
Service Address:	_____	Address: _____
Telephone #:	_____	Telephone #: _____
Contact Person:	_____	Contact Person: _____
Electrician:	_____	General Contractor: _____
Telephone #:	_____	Telephone #: _____
Cell Phone #	_____	Cell Phone # _____
	Business use _____	Personal use _____
	(electrician or customer signature)	(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

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