

## **Commercial or Industrial Electric Service Application**

Instructions: Please complete and return this application after your contractor(s) have been selected.

Submit the application and load survey forms to: Upper Peninsula Power Company – Attention: Customer Contact Center

- E-mail: customerservice@uppco.com
- Fax: 906-485-2431
- Mail: 500 N. Washington St., Ishpeming, MI 49849

Submit the final approved electronic site plan (in AutoCAD and Microstart format) and your construction plans (in PDF format) to: • E-mail: customerservice@uppco.com Questions: Call 800-337-8445 or visit our website at: www.uppco.com TODAY'S DATE: **TYPE OF SERVICE REQUESTED:** (check all that apply) Relocate New Service Upgrade ☐ Temporary Electric ☐ Private Yard Light BILLING AND CONTACT INFORMATION: ☐ Customer PARTY RESPONSIBLE FOR CONSTRUCTION CHARGES: ☐ Contractor Customer Contractor PARTY SUBMITTING THIS REQUEST: CUSTOMER INFORMATION: Legal Business Name: \_\_\_\_\_\_ Tax ID #: \_\_\_\_\_\_ OR Personal Name (Sole Proprietorship): Social Security #: Contact: D/B/A Name: Work #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Fax #: \_\_\_\_ Email: \_\_\_\_\_ Mailing Address: \_\_\_\_\_ Street/P.O. Box City State Zip Code **CONTRACTOR INFORMATION:** Legal Business Name: \_\_\_\_\_\_ Tax ID #: \_\_\_\_\_ Work #: Cell #: Fax #: Email: Mailing Address: \_\_\_\_\_ Street/P.O. Box Citv State Zip Code SITE INFORMATION: \_\_\_\_\_ Lot #: \_\_\_\_\_ Street Address: Town/City/Village: \_\_\_\_\_ County: \_\_\_\_\_ State: Zip Code:

Nearest Neighbor or Nearest Utility Pole #: \_\_\_\_\_\_

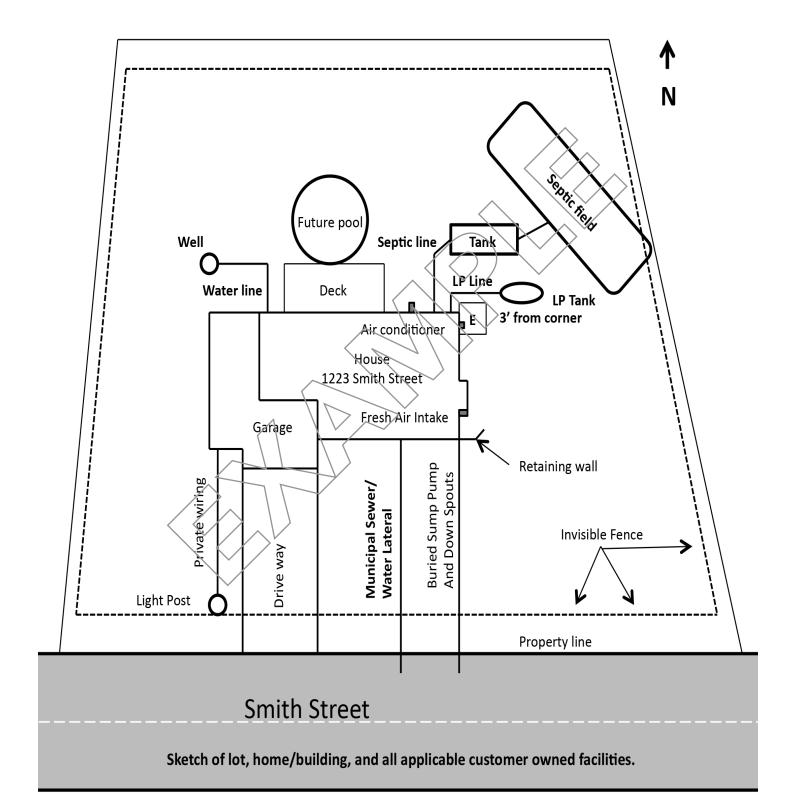
Directions from the Nearest Intersection:

STRUCTURE INFORMATION	N:						
Setback from Edge of Road:		ling Square Footage:					
Building Type: (check one)	☐ Commercial ☐ Agricultural						
Building Energy Use: (check one	) $\square$ Year-round	Seasonal	☐ Electric Heat				
Construction Type: (check one)	☐ Cold Storage	☐ Irrigation	☐ Manufacturing ☐ Office				
	Restaurant	☐ Warehouse	☐ Multi Unit Commercial*				
	Retail	☐ Multi Famil	y*   Electric Vehicle (EV)   Indoor Agricultural				
	☐ Other:						
Total # Electric Meters:							
*If Multi Familyor Multi Unit Co	mmercial building, ple	ease provide label	ing (i.e., suites, apts, units 1, 2, 3or A,B,C):				
ELECTRIC INFORMATION:							
	al Contractor:		_ Contact:				
Work #: C	ell #:	Fax #:	Email:				
Electrical Service Type:   Overhead Underground							
Entrance Size:	trance Size:						
Phase:	Single Phase (120/2	40) Three Pl	nase (120/208)				
Please complete and submit the at	tached Electric Load Sur	rvey form.					
Preferred Meter Location: (i.e., 3 ft. back from NW corner):							
Temporary Service Needed: [	Yes No An	nps:	Voltage:				
Date temporary will be ready to	for service:						
Preferred temporary meter loca	tion:						
PRESENT STATUS OF BUILI	DING PROJECT: (ch	eck all that apply)					
Property is staked  Yes If not, when? Site has been excavated Yes If not, when?							
Building is staked Yes If n	ot, when?	Meter	base installed				
SERVICE READY DATE: (date	e that initiates schedulin	g of service installa	ion)				
		<i>3</i> ,	,				
DATE SITE WILL BE READY FO	R SERVICE:						
PLEASE NOTE: The following rebefore service can be installed	•	e completed	<ul> <li>If a cement transformer pad was poured, must be cured for 10 days.</li> </ul>				
<ul> <li>Final approved site plan and construction plans submitted.</li> <li>Electric load survey submitted.</li> <li>Any required easements signed and submitted.</li> <li>The site and foundation must be backfilled within 6" of final grade.</li> <li>The service route cleared 10' wide.</li> </ul>		submitted.	<ul> <li>Any underground private facilities must be marked.</li> </ul>				
			Construction charges must be paid in advance if				
			applicable.				
		<ul> <li>Other Important Details:</li> <li>UPPCO also requires an electrical inspection (check with your municipality) prior to energizing service.</li> </ul>					
					The electric metering equipment must be installed.		Winter Construction Charges may apply.
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## **Electric Construction Property Site Sketch and Liability Waiver**

Customer Name:								
Service Address: City, State, Zip								
Location Of Customer-Owner	d Facilities							
All above ground and undergi	round facilities must be clearly ide	ntified on your Property Site Sket	ch below.					
Customer is required	to indicate all that apply on the Pr	• •	EXAMPLE on Page 2.					
<ul> <li>Desired electric meter location with footages from nearest corner of the building (Indicate with E).</li> </ul>	<ul> <li>Wells and private water lines including underground sprinkler systems with connecting lines to buildings.</li> </ul>	Municipal sewer/water laterals     Septic systems/drain fields with connecting lines to buildings	LP fuel lines/tanks with connecting lines to buildings					
<ul> <li>External wood furnaces and associated buried heating lines</li> </ul>	<ul> <li>Drain tile/buried down spout and sump pump lines</li> </ul>	<ul> <li>Air conditioning units and all fresh air intakes</li> </ul>	<ul><li>Invisible Fences</li><li>Private underground wiring</li></ul>					
Geothermal heat pumps with connecting lines to buildings	<ul> <li>Planned or potential deck, patio, swimming pools or outbuildings</li> </ul>	<ul> <li>Existing and future landscaping features</li> <li>IE: Landscape berms or retaining walls</li> </ul>	<ul><li>Private cable/satellite TV Lines</li><li>Other</li></ul>					
If no existing or future proposed	orivate facilities on the property chec	k here	<b>♠</b> N					
At the time of construction, all existing or proposed private underground facilities must be marked or exposed before service can be installed.								
I certify that I own or am the au Site sketch, and that I have read facilities. I furthermore agree to underground facilities that occu	Underground Damage Liability Wathorized representative of the owned and understood the above statemed hold Upper Peninsula Power Compurs during the installation of gas or earn this property have been adequate	er of the property of the service add ent regarding marking and / or expo any and/or its agents harmless for a lectric service as a result of failure of	osing all private underground any damage to private					
Signature:		Date	:/					



## Please complete and return this form to:

Upper Peninsula Power Company • Customer Contact Center • 500 N. Washington St., Ishpeming, WI 49849

Residential Service: Phone: 800-562-7680 • Fax: 906-485-2431 • Email: <u>customerservice@uppco.com</u>

Business Service: Phone: 800-337-8445 • Fax: 906-485-2431 • Email: <u>customerservice@uppco.com</u>

Website: www.uppco.com



## **Electric Load Data Form**

Please be as specific as possible								
UPPCO Work Request # (if known)								
Company Providing Data:	Company Providing Data: Contact Person/Title:							
Preferred Contact Method(s):  Phone # :		i-mail Address:						
Project Street Address & City:								
Number of Meters at this Address:								
	(i.e. Suites 30	00-308, Apts. 101-130, Units 1-4	1, or A, B, C)					
Business Type:	Days							
Type of Service: (Check one) New	w Customer	(i.e. $M - F$ , 8 a.m. to 5 Existing Customer	p.m.)					
New Service Size (Amps): 100 2	00	■ 800 ■ 1200 ■ 1600	2000 Bldg S	q. Ft				
New Service Type: Underground	Overhead CT Meterin	g Location (If applicable): 🔲 🤇	On Transformer	On Building				
New Voltage: Single Phase 120/240	☐ Three Phase 120/2	08						
IF UPGRADING - Existing Service Type:	Existi	ng Service Size (Amps):	Existin	Existing Voltage:				
MOTOR LOAD: Please list all motors tha	t are 5 HP or areater se	parately. Motors less than 5 H	IP can be arouped to	paether				
				Soft Start / Variable				
Equipment Description	# of Motors	Size of Motors (HP)	1 or 3 Phase	Frequency Drive				
ELECTRIC LOAD: Other load may include	o. Computars kitchen es	winment water heating cum	lamantal haating a	tc.				
Description	e. Computers, kitchen eq	KW	lemental heating, e	1 or 3 Phase				
Lighting (indoor)				20.01.11000				
Lighting (outdoor)								
Air Conditioning								
Ventilation (other than A/C)								
Refrigeration Equipment								
Receptacles								
WELDERS:								
# of Welders	Amps		Volts					

PLEASE ATTACH ANY OTHER SUPPORTING DOCUMENTATION WHEN SUBMITTING THIS LOAD DATA

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