

COMMERCIAL & INDUSTRIAL LOAD INFORMATION

FORM TO BE COMPLETED BY QUALIFIED ELECTRICAL PROFESSIONAL

SITE & BUILDING INFORMATION

PROJECT NAME _____		PROJECT TYPE _____	EXISTING COMED ACCOUNT # _____
SITE ADDRESS _____		CITY _____	ZIP CODE _____
REQUESTED SERVICE <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary		UNIT TYPE (IF APPLICABLE) <input type="checkbox"/> Residential <input type="checkbox"/> Commercial	
RESIDENTIAL # OF UNITS _____	TOTAL RESIDENTIAL SQ. FOOTAGE _____	COMMERCIAL # OF UNITS _____	TOTAL COMMERCIAL SQ. FOOTAGE _____
HOURS OF NORMAL OPERATION			
Start: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM End: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> 24-hour			

EQUIPMENT AND VOLTAGE

PREFERRED SERVICE EQUIPMENT TYPE

Underground Overhead Vault/High-rise Outdoor Lighting

SERVICE VOLTAGE

120/240V 1-phase 3-wire 120/240V 3-phase 4-wire 120/208V 3-phase 4-wire 277/480V 3-phase 4-wire

480V 3-phase 3-wire (B-phase grounded, not allowed in Chicago) 480V 3-phase 3-wire (ungrounded, req. special equipment & approval)

4kV 12kV 34kV Other: _____

SWITCH INFORMATION (if more than one, please attach the following information per switch)

SWITCH NAME _____	# TOTAL SWITCHES FOR PROJECT _____	# SWITCHES IDENTICAL TO THIS APP _____
SWITCH LOCATION, IF KNOWN _____	SWITCH SIZE (AMPS) _____	SIZE OF CONDUCTOR _____
SWITCH RATING (%) _____	NUMBER OF SECONDARY SETS _____	CONDUCTOR MATERIAL <input type="checkbox"/> CU <input type="checkbox"/> AL