

Service Change Application for Electrical Service

Builders - Please fill out Section A

Homeowner - Please fill out Section B

SECTION A - BUILDERS ONLY

Billing Name: _____ Tax ID #: _____
 Billing Address: _____
 City: _____ State: _____ Zip: _____
 Contact Name: _____
 Phone #: _____ Email: _____

Signature (Authorized Party)

SECTION B - HOMEOWNERS ONLY

Primary Applicant

First Name: _____ MI: _____ Last Name: _____
 Social Security #: _____
 Phone #: _____ Email: _____
 Current Address: _____
 City: _____ State: _____ Zip: _____

Co-Applicant

First Name: _____ MI: _____ Last Name: _____
 Social Security #: _____
 Phone #: _____ Email: _____

Signature (Primary Applicant)

Signature (Co-Applicant)

I understand that a soft credit check will be run on my Social Security number to validate my identity and establish whether my account will be assessed a deposit. If a deposit is required, you will be notified and the deposit will appear on your first bill.

LOCATION INFORMATION

Date Meter Socket will be installed: _____
 Address of service: _____
 City: _____ Zip: _____
 Type of building: Home Garage Pole Building Barn Mobile Home Other: _____

Service type: Overhead to underground Reroute existing primary or secondary line Moving meter base

Installation type: Permanent Temporary *If temporary is chosen, an additional \$215 charge will apply.*

Service size (amps): 100 150 200 320 400 CTS 600 CTS 800 CTS

For services over 200 amps, you must complete the Electric Service & Load Information Form (on back).

Meter Socket Location (when you are facing the front of the house from the outside) On House On Garage
 Right Side Left Side Front Staying in same location Other _____

Buried Private Facilities (including drain tiles, irrigation systems, underground fencing, tanks, consumer-owned electric or gas lines, etc.) **must be clearly marked on your property, and a copy of your property survey, map, or overhead photo clearly depicting the location must be provided.**

Septic System: No Yes **Well:** No Yes **Other:** No Yes _____

Will any of the following connected loads be on an off-peak program? Yes No

If yes, please provide a contact name and phone number to review off-peak programs and metering equipment options.

Name: _____ Phone Number: _____

	Connected Load (KW)	Estimated Demand Load (KW)		Connected Load (KW)	Estimated Demand Load (KW)
Indoor Lighting			Water Heating		
Outdoor Lighting			Mfg. Equipment		
Electric Heat			Motor Load*		
Ground Source Heat Pump			Misc. Equipment		
Under Floor Heating			Receptacles		
Heat Storage			Other _____		
Air Source Heat Pump			Other _____		
Air Conditioning			TOTAL		

*Largest Motor: HP _____ Phase _____ Voltage _____ Class _____ Starts/hr _____ Total HP _____

Any motor over 7.5 HP single phase or 75 HP three phase requires starting equipment approved by Connexus Energy.

Building Area (Square Feet) New _____ Existing _____

It is preferred that a survey is included with the application. If a survey cannot be provided, please draw a sketch below as you are facing from the street toward the front of the house. Include the location of any private services such as well and septic or irrigation.

1. All privately owned utilities (e.g. geothermal systems, wells, septic systems, underground sprinkler systems, etc.) on this property must be clearly marked by the customer.
2. To avoid delays, please make sure your lot is graded to within 4" of final grade, and the 10' pathway for our trench is clear of all obstructions (trees, lumber, etc.). Connexus Energy is not responsible for restoring, to it's original condition, the lawn, yard, landscaping, etc., which might be disturbed during installation.
3. Preferred meter location is on the same side of building/structure as energy stub and within 15' of closest corner. If it is not, additional charges will apply. If unsure of location of energy stub, please call Connexus Energy at 763.323.2650.
4. Meter base must be attached to unit and inspection must be complete before service will be installed and energized. If not, additional charges will apply.
5. Winter construction charge policy is effective from November 1 through April 1. To avoid these charges, work requests must meet all of Connexus Energy's local and state requirements prior to November .

I have read and understand the Conditions of Service. I also understand that my service will not be scheduled until I have made all necessary payments, provided an approved electrical permit or state inspection card to Connexus Energy, and Connexus Energy has applied for and received all necessary permits.

Signature _____ Date: _____

Mail completed form to: Connexus Energy, Attn: MSS, 14601 Ramsey Blvd., Ramsey, MN 55303, or fax to: 763.323.2603.