



Service Notification #: \_\_\_\_\_

# NYSEG Electric Load Form (Commercial, Industrial and Municipal Customers)

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Electrician \_\_\_\_\_ Telephone \_\_\_\_\_

**Service Connection Preferred:** (Note: Installation charges may apply)

- Secondary Voltage (Typical – NYSEG owns transformer)
- Primary Voltage (Customer owns transformer)  Overhead  Underground  Combined OH and UG  Network  Multiple Supply

**Service Configuration Requested:**

	Amps	Phase	Wires	Service Voltage
		1	3	120/240 not to exceed 100 KVA
		1	3	120/208 not to exceed 100 KVA (Requires 5th jaw in meter box)
		3	4	208 wye/120 (50kW min)*
		3	4	240 delta/120 (Overhead transformers only – not to exceed 150 KVA)
		3	4	480 wye/277 (50kW min)**
		3	4	Other Specify: _____ (See note below)

\* Loads requiring transformer capacity in excess of 500 KVA will require padmount transformer and underground service connections.

\*\* 480V requires a disconnect before self-contained meter. Voltages in excess of 480V may be supplied upon request where feasible. See Section III, Electric Services & Meter - General Information & Requirements.

► **Total Square Footage Existing (if upgrading):** \_\_\_\_\_ **Total Square Footage New:** \_\_\_\_\_

Total Electric Loads	1-Phase	3-Phase	KVA	KW
Lighting				
HVAC Equipment				
Process Heating				
Space Heating				
Motors*				
Computer Equipment				
Convenience Power				
Other				

Largest Motors (list with hp): \_\_\_\_\_

\*Motors 10 HP and higher, please include motor code and starts per day \_\_\_\_\_

Specialized Equipment Description (Ex. X-ray equipment, welders, etc.) \_\_\_\_\_

► **Total Connected Load** \_\_\_\_\_ KVA \_\_\_\_\_ KW **Expected Peak Demand** \_\_\_\_\_ KVA \_\_\_\_\_ KW

continued ...

Power Conditioning Equipment  Yes  No Specify Type: \_\_\_\_\_

Emergency Generator  Yes  No Rating: \_\_\_\_\_ kVa Fuel Type:  Gasoline  Diesel  Natural Gas  Other \_\_\_\_\_

Future Additional Loads (kVa/dates): \_\_\_\_\_

**Individual Meter Detail:**

Meter Number	1-Phase/3-Phase	Amps	KVA	KW	Store/Suite Identifier

Submitted by (Signature) \_\_\_\_\_

Name (Please print) \_\_\_\_\_ Date \_\_\_\_\_

**Please return promptly by:** Emailing an electronic copy of the completed load form to NYSEGESI@nyseg.com or faxing to 844.515.1573 or mailing to NYSEG, Attn: Energy Service Installation, Customer Relations Center, P.O. Box 5240, Binghamton, NY 13902-5240.

**Phone:** 1.800.572.1111, Monday through Friday, 7 a.m. to 4:30 p.m. Using the automated system, press 3 for "Start or Stop Service, New Construction or Upgrades" and then press 3 again for "New Construction or Upgrading Service."