



Please submit one form for each work order number requested.

Your Name: _____ **PH#:** _____ Cust Bldr Elec Other
 Company Name: _____ **Contractor ID #:** _____ **E-mail:** _____
 Mailing Address: _____

Ratepayer Name: _____ **PH#:** _____ **E-mail:** _____
 Current Mailing Address: _____

Primary Contact: _____ **PH#:** _____ **E-mail:** _____
 Mailing Address: _____

Required Date for Service: _____

Service/Premise Address: (verify spelling of ST name) _____
 Lot#: _____ County: _____ Development/Subdivision: _____

Work Category:
 Residential Overhead Single Phase
 General Service Underground
 Temporary Service

Electrician Name: _____ **Company Name:** _____
 PH#: _____

Builder Name: _____ **Company Name:** _____
 PH#: _____

Nearest PPL Grid#: _____ <100 FT 100-200 FT >200 FT

To Serve: ___ (Single=1, Double=2, Townhouse=3, Apt=4, Mobile Home=5, TV/Cable=6, Billboard=7, Farm=8, Commercial=9, Other=10)

Service Entrance Amp Size: _____

Air Conditioning: Central _____ BTU's Window Units _____ # of Window Units

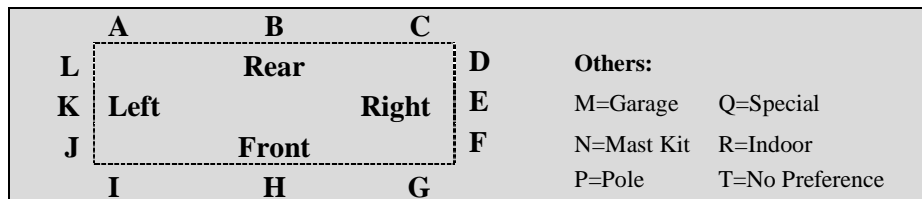
Appliances: 1=Electric Range 2=Electric Water Heater 3=Tankless Water Heater
 4=Both 1&2 5=Both 1&3 6=None

Heat Type: Gas Oil Coal Undecided
 Electric: Baseboard Heat Pump (air source) Heat Pump (ground source)
 Ceramic Radiant Floor/Ceiling Electric Furnace
 Split System Dual Oil Dual Gas Other

Square Footage of Building: _____

Construction Progress: Vacant Lot Foundation Framed Complete

Preferred Meter Location:
 (Enter Letter): _____



Inspection Status: Meter Base Set Caller States Service Inspected

Designer Notification by IVR: Yes No

Driving Directions to Job Site: _____

Other Comments:
