

Southeastern Electric Cooperative, Inc.
Project Application Requirement Form

\$150.00 Engineering deposit is required for each Project Application submitted.

PROJECT (Electrical Work Site)

Name: _____ Contact Person: _____
Service Address: _____ City: _____ State: _____ Zip Code: _____
Telephone: _____ Mobile: _____ Fax: _____
Email Address: _____

ELECTRICIAN

Name/Company: _____
Telephone: _____ Mobile: _____ Fax: _____
Email Address: _____

SERVICE REQUESTED

Type of Structure: Residential Non-Residential
Service Type: Overhead Service Underground Service
Entrance Conductors: Size: _____ Type _____ Number of Conductors _____
Meter Base Size: 100 Amp 200 Amp 400 Amp

LOAD DATA (Please check the box that applies. If electric, then list the KW load)

Total Square Footage _____
Square Footage with HVAC _____ (Square footage that is heated and cooled)
HVAC Heat: Electric Gas _____ kW or _____ Tons
HVAC A/C: Electric _____ kW or _____ Tons
Water Heater: Electric Gas _____ kW
Tankless WH: Electric Gas _____ kW
Pool/Hot Tub Heat: Electric _____ kW _____ HP
Fire Place: Electric Gas
Cooktop/Oven: Electric Gas
Security Light Yes No (Separate agreement must be signed)
Comments or Additional Info: _____

Load data must be completed as much as possible. Cost of changes, due to inadequate or inaccurate information will be borne by the Member/Representative.

Signature: _____

Date: _____