



PO Box 700  
 Jamestown, NY 14702-0700  
 PH: (716) 661-1660  
 FX: (716) 661-1618  
[www.jamestownbpu.com](http://www.jamestownbpu.com)

## NON-RESIDENTIAL REQUEST FOR NEW/UPGRADE ELECTRIC SERVICE FORM A

DATE: _____	ESID# _____
Account Rep: _____	

CUSTOMER INFORMATION	APPLICANT/CONTACT INFORMATION
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Service Address _____	Name _____
City _____	Address _____
Company Name _____	Phone No. ( _____ ) _____
Phone No. ( _____ ) _____	SSN _____ DOB _____
Billing Address (if different than service address) _____	
City _____	State _____ Zip _____

ELECTRICAL CONTRACTOR INFORMATION
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Contractor Name _____	Contractor License No. _____
Contact Name _____	Contact Phone No. ( _____ ) _____

ELECTRIC SERVICE INFORMATION
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Main Service Information			
Service to Install: <input type="checkbox"/> New Service <input type="checkbox"/> Upgrade Existing <input type="checkbox"/> Temporary Service <sup>1</sup> <input type="checkbox"/> New Meter(s) Only			
<b>Voltage/# wires</b> <input type="checkbox"/> 120/240 3 Wire <input type="checkbox"/> 120/208 3 Wire <input type="checkbox"/> 208Y/120 4 Wire <input type="checkbox"/> 480Y/277 4 Wire <input type="checkbox"/> 13,800 3 Wire	<b>Main Disconnect Rating</b> _____ Amps <hr/> <b>Service Type</b> <input type="checkbox"/> Overhead <input type="checkbox"/> Underground	<b>Building Type</b> <input type="checkbox"/> New Construction <input type="checkbox"/> Addition <input type="checkbox"/> Existing <input type="checkbox"/> Subdivision <sup>2</sup>	<b>Meter Information</b> Non-Residential Meters <hr/> Residential Meters <hr/>
Total Projected Load (Include Connected Load Form B)			Complete a separate Form B for each non-residential meter. Complete a separate residential application for each residential meter. Inspection permits and contracts for service required where applicable.
Total connected _____ Kw	Peak summer demand _____ Kw	Peak winter demand _____ Kw	

<i>Application Completed By (please print):</i> Signature _____ Date ____/____/____ <hr/> <i>Customer (please print):</i> Signature _____ Date ____/____/____	<b>To Be Completed By BPU</b> Spot Date: ____/____/____ Completed by: _____ <hr/> Permit Date: ____/____/____ Permit No: _____ <hr/> Connect Date: ____/____/____
<sup>1</sup> Minimum \$150 Fee must be paid prior to service being energized. Additional charges may apply. <sup>2</sup> Additional information may be required.	
<b>WARNING: If the information provided on these forms is inaccurate or incomplete, you may be subject to backbilling on the correct service classification, or you may be precluded from receiving a refund for overcharges based on the correct classification.</b>	