

# City of Milford Electric Department Commercial/Industrial Electrical Load Sheet

\*\*FORM MUST BE COMPLETED IN ITS ENTIRETY. INDICATE ITEMS THAT DO NOT APPLY WITH "N/A". DIRECT ANY QUESTIONS TO THE ELECTRIC DEPARTMENT AT (302) 422-1110.\*\*

Customer Name/Business Name: \_\_\_\_\_

Address/Location of Site: \_\_\_\_\_

**CHECK ALL THAT APPLY:**

NEW SERVICE: _____	ADDITION TO EXISTING SERVICE: _____
PRIMARY METERING: _____	SECONDARY METERING: _____
OVERHEAD: _____	UNDERGROUND: _____

**SERVICE TYPE/SIZE:**

Single Phase (120/240)	_____ 200 AMP	_____ 400 AMP		
Commercial Three Phase (120/208)	_____ 200 AMP	_____ 400 AMP	_____ 600 AMP	_____ 800 AMP
Commercial Three Phase (277/480)	_____ 200 AMP	_____ 400 AMP	_____ 600 AMP	_____ 800 AMP
Industrial Three Phase (120/208)	_____ 200 AMP	_____ 400 AMP	_____ 600 AMP	_____ 800 AMP
	_____ 1000 AMP			
Industrial Three Phase (277/480)	_____ 200 AMP	_____ 400 AMP	_____ 600 AMP	_____ 800 AMP
	_____ 1000 AMP	_____ 2000 AMP	_____ 3000 AMP	

**COMPLETE THE FOLLOWING:**

Entrance Size: \_\_\_\_\_ AMP: \_\_\_\_\_ Voltage: \_\_\_\_\_ Phase: \_\_\_\_\_  
 Wire Size: \_\_\_\_\_ # of Runs: \_\_\_\_\_  
 Conduit Size: \_\_\_\_\_ # of Runs: \_\_\_\_\_ (Circle) Aluminum or Copper

**COMPLETE THE FOLLOWING:**

Heat (Circle) Gas or Electric	_____ KW	_____ V	_____ Phase	_____ AMP
Air Conditioning	_____ KW	_____ V	_____ Phase	_____ AMP
Lighting	_____ KW	_____ V	_____ Phase	_____ AMP
Water Heater (Circle) Gas or Electric	_____ KW	_____ V	_____ Phase	_____ AMP
Receptacles	_____ KW	_____ V	_____ Phase	_____ AMP
Motor Loads (single phase)	_____ KW	_____ V	_____ Phase	_____ AMP
Range	_____ KW	_____ V	_____ Phase	_____ AMP
Total Connected:	_____ AMP:	_____		

Provide Information on Other Critical Electric Equipment: \_\_\_\_\_

**PROVIDE THE FOLLOWING:**

Date Services Needed: \_\_\_\_\_  
 Electrical Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Electrical Consultant: \_\_\_\_\_ Phone: \_\_\_\_\_

