



APPLICATION FOR ELECTRIC SERVICE

ZEELAND BOARD OF PUBLIC WORKS

Billing Information

Customer Name: _____
 Mailing Address (monthly bill): _____
 City, St, Zip: _____

Billing Phone, Email & Fax

Phone: _____
 Fax: _____
 Email: _____

New Service

Subdivision/Project Name: _____
 Address: _____
 Lot/Unit/Apt: _____
 City/Township: _____
 Approx Date Temp Service Required: _____
 Approx Date Perm Service Required: _____

Electrician

Name: _____
 Phone: _____
 Mobile: _____

Customer Contact

Name: _____
 Phone: _____
 Fax: _____
 Email: _____

Is temporary for more than one site? Yes No
 Is this a rental? Yes No

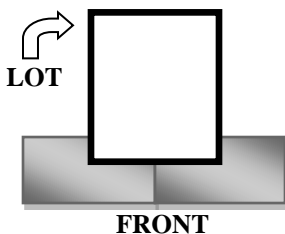
Type of Connection	Connect To	Entrance Size	Load
<input type="checkbox"/> Temporary Overhead <input type="checkbox"/> Permanent Overhead <input type="checkbox"/> Temporary Underground <input type="checkbox"/> Permanent Underground	<input type="checkbox"/> New Bldg <input type="checkbox"/> Existing Bldg <input type="checkbox"/> Other _____	Amps: _____ Voltage: _____ Estimated Demand: _____	Residential: Water Heater _____ Heating _____ Com/Ind: Primary Mtr? _____ Heating _____

1. Indicate your desired meter location on the diagram below. We will contact you to confirm this by the phone number you have given above. If you proceed without your building before you are notified of an approved entry location it may result in additional cost to you.

2. Draw the location of the secondary service wire.

Please return to:
 Zeeland Board of Public Works
 Attn: Tracey DeKramer
 350 E. Washington Ave.
 Zeeland, MI 49464
 Phone: (616) 772-6212 Fax: (616) 772-6242
 email: traceyd@zeelandbpw.com

Please attach your building site map



Building Owner's Signature: _____

Please print name here: _____

Date: _____