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: _____

Is temporary for more than one site? ☐Yes ☐No

Is this a rental? ☐Yes ☐No

Electrician

Name: _____

Phone: _____

Mobile: _____

Customer Contact

Name: _____

Phone: _____

Fax: _____

Email: _____

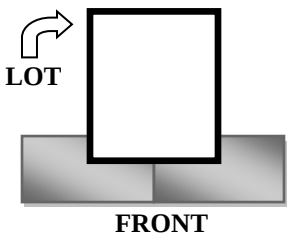
Type of Connection	Connect To	Entrance Size	Load
☐ Temporary Overhead	☐ New Bldg	Amps: _____	Residential: Water Heater _____
☐ Permanent Overhead	☐ Existing Bldg	Voltage: _____	Heating _____
☐ Temporary Underground	☐ Other	Estimated Demand:	
☐ Permanent Underground	_____	_____	Com/Ind: Primary Mtr? _____
			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: Brian Maat
350 E. Washington Ave.
Zeeland, MI 49464
Phone: (616) 879-2428
email: bmaat@zeelandbpw.com

Please attach your building site map



Building Owner's Signature: _____

Please print name here: _____

Date: _____