



# TOWN OF FOREST CITY

PO BOX 728~128 N POWELL ST FOREST CITY, NC 28043

(828) 248-5239 (F) (828)245-6143

## NON-RESIDENTIAL ACCOUNT INFORMATION FORM

Dear Customer:

To provide you with timely and accurate service, complete sections on Billing Information, Service (Site) Address Information, and Load Information. The Load Information section is needed by our engineering group in order to accurately size our equipment. If the information is not available at this time, please complete the Billing and Service Information so the necessary paperwork to provide service to your facility can be initiated. Once you have determined the load Information, please fax or mail the Information to:

**Town of Forest City  
Attn: Electrical Dept.  
PO Box 728  
Forest City, NC 28043**

**Fax: (828) 248-5216  
Phone: (828) 245-0149**

### BILLING INFORMATION

Legal Name of Ownership: \_\_\_\_\_

DBA (Doing Business As): \_\_\_\_\_

Form of Ownership:  Sole Proprietor  Corporation  Partnership  Limited Partnership  Other

Has credit been established with the Town of Forest City?  Yes  No

If yes, list other Account # or service address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State and Zip: \_\_\_\_\_

Additional Mailing Info: \_\_\_\_\_

Billing Contact Name: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Property Ownership:  Own  Rent/Lease

Name of Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

### SERVICE (SITE) ADDRESS INFORMATION

Service Address: \_\_\_\_\_

City, State and Zip: \_\_\_\_\_ County: \_\_\_\_\_

Directions: \_\_\_\_\_

New Service (No existing service lines):  Upgrade Existing Service (Existing service lines):

Hours of Operation: M-F: \_\_\_\_\_ Weekends: \_\_\_\_\_ Other: \_\_\_\_\_

Requested By: \_\_\_\_\_ Title: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Date Service Needed: \_\_\_\_\_ **NOTE:** A final inspection may be needed to complete your service request. Check with the appropriate City Inspections Department to determine their procedures.

#### GENERAL CONTRACTOR/BUILDER

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

#### ELECTRICIAN

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

### DELIVERY INFORMATION

**Total Load:** \_\_\_\_\_ **Additional Load Only (Existing Meter No:** \_\_\_\_\_ **)**

Check Service Desired:  Overhead  Underground Customer Wire Type:  Copper  Aluminum

Check Phase Desired:  Single Phase  3 Phase Number of Wries:  3  4  5  6  More

Delivery Voltage: \_\_\_\_\_ Volts Service Size: \_\_\_\_\_ Amps

No. of Conductors Per Phase: \_\_\_\_\_ Size of Conductors: \_\_\_\_\_ No. of Neutral Conductors: \_\_\_\_\_ Size of Neutral: \_\_\_\_\_

(NOTE: If underground 3-Phase Service is required, the number of conductors per phase is limited to 12.)

Gross Square Footage: \_\_\_\_\_ Conditioned Square Footage: \_\_\_\_\_



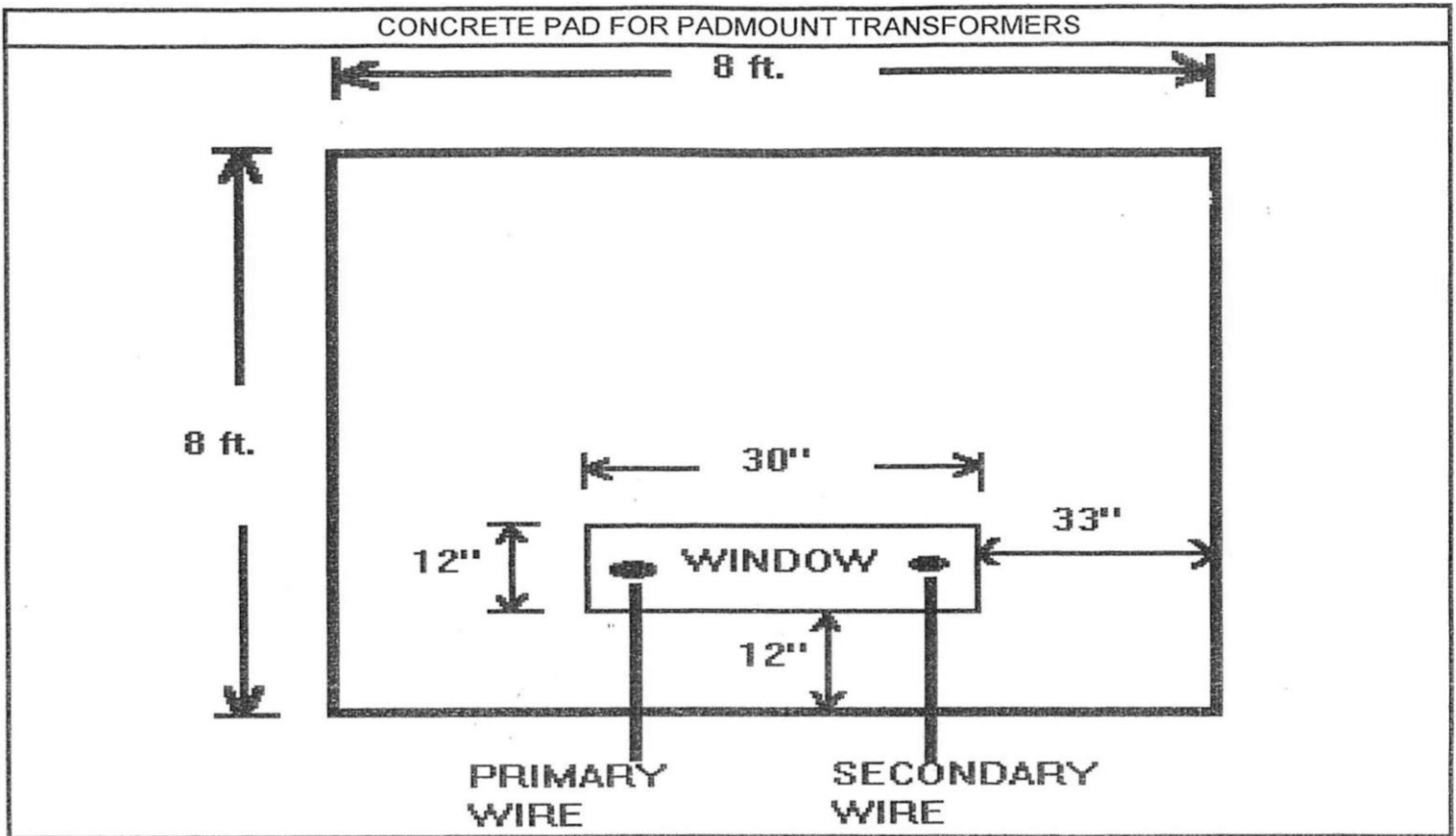
**Town of Forest City  
Underground/Overhead Service Agreement**

The Town of Forest City agrees to install and maintain electric service on owner's property. The owner agrees to show (by either paint, flags or exposing underground facilities) such as water lines, septic tanks, drain fields, electric lines or any other such underground facilities. The owner assumes all responsibility for damage to his/her facilities if they are omitted or incorrectly marked, and further agrees to be responsible for damage, and or replacement of shrubs, trees, grass, roadway surfaces (gravel, pavement, etc) and any other facilities that may be damaged due to the nature of this work.

I HAVE READ AND UNDERSTAND THE CONDITIONS SHOWN ABOVE.

Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

Owner's Billing Address \_\_\_\_\_



- 1) Contractor/Owner will be responsible for forming and pouring pad.
- 2) Any variation in this drawing will be at the discretion of Town Electric Dept.
- 3) Pad shall be 6 to 8 inches deep.
- 4) Pad shall be at least 12 inches from any structure.
- 5) Conduit shall extend no more than 3 inches above top of slab.
- 6) Form shall be inspected by the Town Electric Dept. before pouring.