

New Service Application

**Village of Hyde Park
PO Box 400
Hyde Park, VT 05656
(802) 888-2310
(802)-888-6878 Fax**

Electrician Name: _____
Address: _____
City: _____ State _____
Phone: _____

Owners Name & Billing Address	Builders Name
Name: _____	Name: _____
Address: _____	Address: _____
City: _____	City: _____
State: _____ Zip: _____	State: _____ Zip: _____
Phone: () _____	Phone: () _____
Applying for service at: _____	Account # _____

Type of Service:

Residential Municipal Commercial Industrial
 Farm Other Overhead Underground

Service Characteristics:

Electrical Load Characteristics:

Volts: _____	kW Lighting: _____	kW Recepticles: _____
Phases: _____	Laundry: _____	Dishwasher: _____
Wires: _____	Jacuzzi/Sauna: _____	Pumps: _____
Cable Size: _____	Other: _____	Meter type _____
Base: _____	Total kW load: _____	

Number of services at this location: _____

Desired Completion Date: _____

Signature: _____ Date of Application: _____
(Party Applying)

Commercial Only
Attach 1 copy of electrical and architectural drawings and site plan.

For office use only

Meter number: _____ Route number: _____ Stop: _____

Account number: _____ Make: _____ Class: _____

Date meter set: _____

In reading: _____ Volts: _____ Amps: _____ Dials: _____ Seal: _____

Multiplier: _____ Demand: _____ Rate: _____

Meter location: _____

Transformer Number: _____ kVa _____ Primary _____ Secondary _____

Signature: _____ Date of approval: _____