## **Planning & Development Department**

803-329-5590 / permits@cityofrockhill.com

Physical (By Appointment Only): 155 Johnston Street, Rock Hill, SC 29730

Mailing: PO Box 11706, Rock Hill, SC 29731-1706

Complete this form to request your electric service.

www.cityofrockhill.com



## **ELECTRICAL LOAD DATA FORM**

Project Name:		Plan#:
Project Address	s:	
New Service D	Existing Service	☐ Upgrade to Existing Service ☐
Underground S	ervice   Overh	ead Service
New Connected	d Loads (Kilowatts):	1. Lights (Interior):  2. Lights (Exterior:  3. Water Heater: Gas
		Total:
Type of Busines	ss/ Bldg.:	Total Square Feet:
Voltage Requir	ement: 120/240V 1PH 3	Wire □ 120/208V 3PH 4 Wire □ 277/480V 3PH 4 Wire □
Approximate D	ate Service Requested:_	Size of Service (Amps):
Service Informa	ation: AL 🗆 CU 🗆	Conductor Size: Neutral Size:
# of co	nductors per phase:	# of neutral conductors:
<ul><li>If ins</li><li>Subr</li><li>will</li></ul>	stalling a trough for multipl	_
		essitate reordering of equipment by the City may result in additional
charges by the C peak demand ba on this estimated	ity, and/or may result in an sed on the information abo	extended date for service. If requested, the City will furnish an estimated ove, but the customer is advised that the contract demand is based solely be customer is liable to pay a one-half of this contract demand as a billing
		Company:
Phone:	Email:	
Mailing Addres	s:	
Signature:		Date:

Electric Load Data Form Last Updated 12/18/22