



NASHVILLE ELECTRIC SERVICE



APPLICATION FOR NEW COMMERCIAL SERVICE - 50kW and larger

For each metered service, please complete the following information and e-mail to _____ or fax 615.747.3552

1. CUSTOMER/BUSINESS INFORMATION

Legal Business Name: _____ Federal Tax ID (EIN) #: _____ Corporate Phone: _____
Corporate Address: _____ City: _____ State: _____ Zip: _____
Corporate Contact Name: _____ Title: _____ Email: _____

2. ELECTRIC SERVICE ACCOUNT INFORMATION

Service Address: _____ City: _____ State: _____ Zip: _____
Mailing Address: _____ City: _____ State: _____ Zip: _____
Site Representative Name: _____ Title: _____ Email: _____

3. GENERAL FACILITY INFORMATION See www.SICCODE.com for more information

SIC/NAICS Facility Code: _____ Total Square Footage: _____ Service Turn-on Date: _____
Days/Hours of Operation: _____ Existing Square Footage: _____ Primary Use of Facility: _____

4. CONTRACTOR INFORMATION

Business Name: _____ General Contractor Electrical contractor
Contact Name: _____ Title: _____ Phone: _____ Email: _____

5. SERVICE INFORMATION

The Electric Service Guidelines are found at: www.nespower.com/content.aspx?page=guidelines *Sections B-E are not required for Successor Turn on

A. Action	B. Service Size	C. Service Type	D. Voltage	E. Meter Location
<input type="checkbox"/> Permanent	<input type="checkbox"/> 100 A	<input type="checkbox"/> Utility Pole/Overhead	<input type="checkbox"/> 120/240V-1 Phase/3 Wire	<input type="checkbox"/> Meter Room
<input type="checkbox"/> Temporary	<input type="checkbox"/> 200 A	<input type="checkbox"/> Utility Pole/Underground	<input type="checkbox"/> 120/208V-3 Phase/4 Wire	<input type="checkbox"/> Pedestal
<input type="checkbox"/> Meter Change	<input type="checkbox"/> 400 A	<input type="checkbox"/> Pad Transformer	<input type="checkbox"/> 277/480V-3 Phase/4 Wire	<input type="checkbox"/> Outside Wall
<input type="checkbox"/> Successor *	<input type="checkbox"/> 600 A	<input type="checkbox"/> Transformer Vault		<input type="checkbox"/> Switchgear/Meter Center
	<input type="checkbox"/> Other			<input type="checkbox"/> Customer Pole

6. ELECTRIC LOAD INFORMATION (Please list new loads only)

Installed Item	Connected Load	Installed Item	Connected Load	Installed Item	Connected Load	Installed Item	Connected Load
Lighting	_____ kW	Other Motors	_____ kW	Heating	_____ kW	Other	_____ kW
Water Heating	_____ kW	Fire Pump	_____ kW	Refrigeration	_____ kW	Other	_____ kW
Receptacles	_____ kW	Cooking Equip.	_____ kW	Elevator	_____ kW	Other	_____ kW
Largest Motor	_____ kW	Air Conditioning	_____ kW	Vehicle Charger	_____ kW	Total Connected	_____ kW

Alternative energy sources: Generator Renewable Generation Battery Storage Natural Gas Geothermal

7. Certification

I certify this information to be correct to the best of my knowledge and agree to notify Nashville Electric Service (NES) of any changes to the facility such as service size, kW load, alternate power sources, or other electric service impacts.

I also understand this completed form obligates the Customer to the [NES Terms and Conditions](#), [NES Policies & Regulations](#), and [NES Schedule of Fees and Charges](#); all available at our website www.nespower.com/content.aspx?page=policies.

The Customer's Representative signing this Application represents and warrants that he or she is duly authorized to execute this Application and that such execution creates a valid, binding and enforceable legal obligation of the Customer.

Customer Representative: _____ Title: _____ Date: _____

8. FOR NES USE ONLY

Received by: _____ Date: _____ WR#: _____ Account No: _____ Ex. Peak kW: _____