Southwestern Electric Cooperative, Inc.

Your Touchstone Energy® Cooperative

SERVICE FACTS FORM

From: _____

Representative: _____ Date: _____

Phone: _____ Fax: _____

PROJECT INFORMATION

Owner: _____

Representative: _____ Phone: _____

Location: _____

Type of Connection: _____ Start Date: _____

Contractor: _____ Address: _____

Contact Person: _____ Phone: _____

Southwestern Electric Cooperative construction charges to be paid by: (choose one) ☐ Owner ☐ Contractor

ELECTRICAL REQUIREMENTS

Phase (choose one): ☐ Single ☐ Three Voltage: _____ Total Amps: _____

Choose one ☐ Underground ☐ Overhead Wire Size: _____ # of Runs: _____

KW LOAD	CONNECTED	FUTURE
Lighting	_____KW	_____KW
Water Heaters	_____KW	_____KW
Cooking	_____KW	_____KW
Motor Load Minus A/C	_____KW	_____KW
Equipment KW Load	_____KW	_____KW
Total A/C Tons _____	_____KW	_____KW
LARGEST UNIT _____ (1 TON = 3.5 KW)	_____KW	_____KW
TOTAL	_____KW	_____KW

HEATING	CONNECTED	FUTURE
Resistance	_____KW	_____KW
Heat Pump Tons _____ (1 TON = 3.5 KW)	_____KW	_____KW
Gas	_____KW	_____KW
Other	_____KW	_____KW
TOTAL	_____KW	_____KW

Comments: _____

_____

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revised 2-19