



Southwest Rural Electric Assn., Inc. • Tipton, OK • Your Touchstone Energy Cooperative

700 N. Broadway
P.O. Box 310
Tipton, OK 73570
1-800-256-7973

Commercial / Industrial Energy Information

The following information is important to assist Southwest Rural Electric Association, Inc. (SWRE) in providing you with safe, reliable electrical service. In order to provide you with the best service possible, SWRE requires the information requested below about you and your new business. Once received, someone may contact you to clarify information provided below.

Please Print or Type (* indicates required information)

Today's Date: Service Start date:

Contact Information

*Company Name *Contact Name
*Mailing Address *Phone
*Project 911 address *E-Mail

Preferred method of contact:

Type of facility: Existing Service New Service

Voltage required: Single phase Three phase
120/240 120/208 277/480 Other

Electric Entrance Size: 100 amp 200 amp 400 amp other
Total electric Gas

Stage of Construction: (if new) Not Started Staked Foundation Under Roof

Planned Equipment Usage

HVAC

Number of Units: AC Tons: AC SEER: Daily Hours in use:
Number of Units: AC Tons: AC SEER: Daily Hours in use:
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Lighting

Type of Lighting: Number of Units: Wattage: Daily Hours in use:
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Motor Load

Horsepower: _____ Voltage: _____ Amps: _____ Daily Hours in use: _____
Horsepower: _____ Voltage: _____ Amps: _____ Daily Hours in use: _____
Horsepower: _____ Voltage: _____ Amps: _____ Daily Hours in use: _____

Air Ventilation/ Fans / Carbon filters

Number of Units: _____ Voltage: _____ Amps: _____ Daily Hours in use: _____
Number of Units: _____ Voltage: _____ Amps: _____ Daily Hours in use: _____
Number of Units: _____ Voltage: _____ Amps: _____ Daily Hours in use: _____

Humidifiers

Number of Units: _____ Voltage: _____ Amps: _____ Daily Hours in use: _____
Number of Units: _____ Voltage: _____ Amps: _____ Daily Hours in use: _____

Pumps _____ Single phase _____ Three phase

Number of Units: _____ Voltage: _____ Amps: _____ Daily Hours in use: _____
Number of Units: _____ Voltage: _____ Amps: _____ Daily Hours in use: _____
Number of Units: _____ Voltage: _____ Amps: _____ Daily Hours in use: _____

Auxiliary Load _____ Single phase _____ Three phase

Number of Units: _____ Voltage: _____ Amps: _____ Daily Hours in use: _____
Number of Units: _____ Voltage: _____ Amps: _____ Daily Hours in use: _____

Estimated percentage of equipment that will be operating at once: _____

Total amps to be served: _____

Electrical Contractor Signature: _____

Phone: _____ License Number: _____ State: _____

Form can be faxed to (580) 667-5284, ATTN: Rick Risinger.