

Electrical Load Data Sheet

Please Attach Two Copies of Site Plan

This is not a request for service.

4600 Commerce Loop, Olive Branch, MS 38654 Mailing Address: PO Box 405, Byhalia, MS 38611 Phone: 662-895-2151/Fax: 662-892-4968

www.northcentralelectric.com

Facility Name:					Date:	
Directions:						
		Electric Service Da	<u>nta</u>			
Service Request Type:	New Constructi	on 🗌 Existing	Electr	ic Overhead Conve	ersion To Underground	
Anticipated Service Date:	Тетро	orary Electric Sel	r vice: Yes [□ No □ (Need Da	ate: <u>)</u>	
Electric Service Type:	Overhead 🗌 Undergro	ound (Padmount T	ransformer)]Underground (Po	le Mount Transformer)	
Entrance Size (Amps):	A Conduit #/Dia.:	/" Co	nductor #Sets	s/Size: /	(AWG/kcm)**	
Metering Comments:						
Facility Has a Total of	Sq-Ft of Floor Area	On Floors of W	hich	Sq-Ft Are Are	ea Comfort Conditioned	
Basement/Attic/Other Living Sp			· ·		,	
Facility Has Tons of Co	ooling Capacity Using _	Unit(s) ** - Cu	stomer/Contract	or to supply NEMA 2-He /service cables in pad m	ble connectors for all	
		0011111	croial secondary	/oervice oubles in pad n		
Requested Service Voltage/Type	Available Service	Connected Loads	1-Phase kW	3-Phase kW	Office Use Only	
ronago, rypo	<u>OH UG</u>	Space Heating				
120/240V 1-Phase, 3-wire	Yes Yes	A/C/Heat Pump				
120/208V 1-Phase, 3-wire	Yes Yes	Air Handlers				
120/208V 3-Phase, 4-wire	Yes Yes	Lighting				
277/480V 3-Phase, 4-wire	Yes Yes	Water Heating Cooking				
Other		Refrigeration				
		Welding*				
		Misc/Receptacle				
Based on your experience and load data, estimate what you believe the <u>true</u> total peak kW Demand will be kW.		Battery Chargers				
		* May Require Special Consideration				
Data for the Larg	nest Motor	Other (Motor) Loa	ds/Freq of Us	e/Other Important	Notes:	
HP: Voltage:						
FLA: LRA: Reduced Voltage Starting: Yes						
		40.000 040.000 011				
!!25HP and greater motors requi	red to have reduced vol	Contact Information	on			
Responsible Party (sign be						
Name:		Name:				
Address:		Address:	7:			
City/State/Zip:		City/State/	Zip:			
Name:						
Address:						
Address:						
Commente			formation			
Comments:						
	Submitted Dv/					

Submitted By: