



PO Box 700
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RESIDENTIAL SERVICE

NEW/UPGRADE ELECTRIC

ESID#	CSR:
Account #	

CUSTOMER INFORMATION

Service Address _____ City _____

Customer Name _____ SSN _____ DOB _____

Home Phone No. (_____) _____ Cellular Phone No. (_____) _____

Spouse/Joint Name _____ SSN _____ DOB _____

Mailing Address (if different than service address) _____

City _____ State _____ Zip _____

ELECTRICAL CONTRACTOR INFORMATION

Contractor Name _____ Contractor License No. _____

Contact Name _____ Contact Phone No. (_____) _____

ELECTRIC SERVICE INFORMATION

Existing Service: Existing Service Size _____ (Amps) Existing No. of Meters _____

Service to Install: New Service Upgrade Existing Temporary Service¹ Estimated Date Service Requested: _____/_____/_____

¹Minimum \$150 Fee must be paid prior to service being energized. Additional charges may apply.

Electric Service Classification²: Single Family Multi-Family No. of Meters: _____

²Residential Service Available ≤5 KVA, Single Phase, 120/240 Volts, 3-Wire, ≤200 Amps ONLY.

New/Upgrade Service Type: Overhead Underground Increase Load? Yes No

New/Upgrade Size of Service (Amps): 100 150** 200** If Yes, KW: _____

**150/200 AMP ELECTRIC LOAD QUESTIONS (check all that apply)

Electric Heat*** Electric Hot Water Heater Heat Pump Central A/C Spa/Hot Tub Pool

Other _____

***If Electric Heat is selected, KW load or sq. ft. information is required: KW Load _____ sq. ft. _____

Completed "Certificate of Compliance to Minimum Insulation Standards" Form - Date Received _____/_____/_____

Consent is hereby given to construct, erect and maintain on the highway adjacent to or through my property all pipes, poles, wires and apparatus connected with the line from which service is to be supplied and to trim trees located on my property as the Utility finds necessary for service from its electrical lines, and grants to the Utility's authorized agents and employees the right of access at all reasonable times to any and all premises furnished with service for the purpose of inspecting any wires or electric devices on said premises, reading or installing meters and metering equipment, and removing or repairing any property of the City, or for any other reasonable purpose connected to the Utility System of the City.

Application Completed By (please print): _____

Signature _____ Date _____/_____/_____

Customer Signature _____ Date _____/_____/_____

By picking up metering equipment provided by the Jamestown Board of Public Utilities, I hereby agree that the electric service and inspection will be completed within 60 days of this date. If electric service and inspection are unable to be completed within 60 days, I will file an extension or will return the metering equipment to the Jamestown Board of Public Utilities.

Meter Socket Received By: _____

Signature _____ Date _____/_____/_____

To Be Completed By BPU

Spot Date: _____/_____/_____

Completed by: _____

Meter Part No.: _____

Permit Date: _____/_____/_____

Permit No.: _____

Permit No.: _____

Permit No.: _____

Connected: _____/_____/_____