



**Electric Sample Form No. 79-1216**  
Application For New Service or Project

Sheet 1

(N)  
(N)

**Please Refer to Attached  
Sample Form**

(Continued)

*Advice* 6337-E  
*Decision* D.20-09-035,  
D.21-06-002

*Issued by*  
**Robert S. Kenney**  
*Vice President, Regulatory Affairs*

*Submitted*  
*Effective*  
*Resolution*

October 15, 2021  
December 20, 2021



# APPLICATION FOR NEW SERVICE OR PROJECT

Project Number \_\_\_\_\_

To apply online, please visit [yourprojects.pge.com](http://yourprojects.pge.com). If you have questions or if you would like to apply by phone, please call us at 1-877-PGE-SRVC. Or, mail this completed form to PG&E New Construction Services at P.O. Box 24047 Fresno CA, 93779-4047.

## PART 1: Application Type

### 1A. Select Customer Type, Facility Type, Request Category, and Request Type

Customer and Facility Type (select one)	Request Category (select one)	Request Type (select one or more within the same Request Category)		
		Commodity		
		Electric	Gas	
<input type="radio"/> Agency (City, County, Caltrans) <ul style="list-style-type: none"> <li><input type="radio"/> General (Agency)</li> <li><input type="radio"/> Building / Structure</li> <li><input type="radio"/> Traffic Signals / Signs</li> </ul> <input type="radio"/> Agricultural <ul style="list-style-type: none"> <li><input type="radio"/> General (Agricultural)</li> </ul> <input type="radio"/> Commercial <ul style="list-style-type: none"> <li><input type="radio"/> General (Commercial)</li> <li><input type="radio"/> Commercial Complex</li> <li><input type="radio"/> Commercial Single Unit</li> <li><input type="radio"/> Electric Vehicle Charging Station</li> </ul> <input type="radio"/> Industrial <ul style="list-style-type: none"> <li><input type="radio"/> General (Industrial)</li> <li><input type="radio"/> Industrial Complex</li> <li><input type="radio"/> Industrial Single Unit</li> </ul> <input type="radio"/> Mixed Use (Commercial / Residential) <ul style="list-style-type: none"> <li><input type="radio"/> Mixed Use (Commercial / Residential)</li> </ul> <input type="radio"/> Residential <ul style="list-style-type: none"> <li><input type="radio"/> Apartments</li> <li><input type="radio"/> Condominiums / Townhomes</li> <li><input type="radio"/> Domestic Well Only</li> <li><input type="radio"/> Duplex</li> <li><input type="radio"/> Multi-Family Residential</li> <li><input type="radio"/> Single Family (1 Lot)</li> <li><input type="radio"/> Single Family (2-4 Lots)</li> <li><input type="radio"/> Single Family Residential</li> <li><input type="radio"/> Subdivision - Lot Sale (5+ Lots)</li> <li><input type="radio"/> Subdivision - Production Build-out (5+ Lots)</li> </ul> <input type="radio"/> Streetlight & Outdoor Area Lighting <ul style="list-style-type: none"> <li><input type="radio"/> Outdoor Area Lighting</li> <li><input type="radio"/> Street &amp; Highway Lighting</li> </ul> <input type="radio"/> Telecommunications <ul style="list-style-type: none"> <li><input type="radio"/> Cable / TV / Internet</li> <li><input type="radio"/> Macro Cells</li> <li><input type="radio"/> Small Cells</li> </ul> <input type="radio"/> Temporary Services <ul style="list-style-type: none"> <li><input type="radio"/> Temporary</li> </ul>	<input type="radio"/> Permanent Removal	<input type="radio"/> Remove Service & Meter <input type="radio"/> Remove Streetlight Connection	<input type="radio"/> Remove Service & Meter	
	<input type="radio"/> Service Relocation	<input type="radio"/> Overhead to Underground <input type="radio"/> Relocate Panel/Meter <input type="radio"/> Reroute Service Line	<input type="radio"/> Relocate Panel/Meter <input type="radio"/> Reroute Service Line	
	<input type="radio"/> Studies / Evaluations	<input type="radio"/> AIC Letter <input type="radio"/> Arc Flash Study <input type="radio"/> Electric Vehicle Load Assessment <input type="radio"/> Pool Plan Reviews		
	<input type="radio"/> Temporary Disconnect or Shutoff for Safety	<input type="radio"/> Temp Disc. – Panel Maintenance <input type="radio"/> Temp Disc. – Working Near Power Lines		
	<input type="radio"/> Upgrade or Change	<input type="radio"/> Add Meter <input type="radio"/> Electric Voltage Change <input type="radio"/> Increase Load <input type="radio"/> Overhead to Underground <input type="radio"/> Upgrade Elec Panel	<input type="radio"/> Add Meter <input type="radio"/> Gas Pressure Change <input type="radio"/> Increase Load	
	<input type="radio"/> Other	<input type="radio"/> Other		
	<b>Existing Service Connections</b>			
	<input type="radio"/> Start a Project			
			<input type="radio"/> Install Permanent Service <input type="radio"/> Install Temporary Service	<input type="radio"/> Install Permanent Service <input type="radio"/> Install Temporary Service
	<b>Non-Service Related Requests</b>			
	<input type="radio"/> Removals		<input type="radio"/> Remove Idle Facilities	<input type="radio"/> Remove Idle Facilities
	<input type="radio"/> Relocation		<input type="radio"/> Raise/Lower to Grade <input type="radio"/> Relocate PG&E Facilities	<input type="radio"/> Raise/Lower to Grade <input type="radio"/> Relocate PG&E Facilities
	<input type="radio"/> Streetlights		<input type="radio"/> Streetlight Shielding	
	<input type="radio"/> Studies / Evaluations		<input type="radio"/> Miscellaneous Study	<input type="radio"/> Miscellaneous Study
	<input type="radio"/> Other		<input type="radio"/> Other	<input type="radio"/> Other
	<b>Pre-Project Inquiry</b>			
	<input type="radio"/> Studies / Evaluations		<input type="radio"/> Check for Service Availability	<input type="radio"/> Check for Service Availability

### 1B. Electric Service Type (select one)

- Overhead
  Underground

### 1C. Occupancy Type (required for Agency General and Buildings, and Commercial Single Unit facilities only) \_\_\_\_\_

† Information collected on this form is used in accordance with PG&E's Privacy Policy. The Privacy Policy is available at [pge.com/privacy](http://pge.com/privacy).



# APPLICATION FOR NEW SERVICE OR PROJECT

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## PART 2: Project Information

### 2A. Project Name \_\_\_\_\_

Is this request due to a major natural disaster?  Yes  No

### 2B. Project Location

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Cross St (Optional) \_\_\_\_\_

Latitude (Optional) \_\_\_\_\_ Longitude (Optional) \_\_\_\_\_

Building Permit Number (Optional) \_\_\_\_\_ Assessor Parcel Number (Optional) \_\_\_\_\_

Tract Number (Optional) \_\_\_\_\_

Work Description \_\_\_\_\_

Is this project is subject to **Buy America** requirements implemented by the Service Transportation Assistance Act with federal funding from: (Optional)  Yes \_\_\_\_\_  No \_\_\_\_\_

Federal Highway Administration

Federal Transportation Administration

Federal Railroad Administration

Not Applicable

### 2C. Service Data

Approximate Project Completion Date \_\_\_\_\_

(Please note that the date requested is subject to availability as well as the scope of your project.)

Zero lot line? (Optional)  Yes  No Number of Gas Services \_\_\_\_\_ Total Number of Gas Meters Needed \_\_\_\_\_

Number of Electric Services \_\_\_\_\_ Total Number of Electric Meters Needed \_\_\_\_\_

Number of Buildings (Optional) \_\_\_\_\_ Number of Lots / Unit \_\_\_\_\_

Number of Stories \_\_\_\_\_ Existing Square Ft. (Optional) \_\_\_\_\_ New Square Ft. (Optional) \_\_\_\_\_

Total Square Ft. \_\_\_\_\_ Average Square Ft. \_\_\_\_\_ Largest Square Ft. \_\_\_\_\_

Square Ft of Building (including all floors) \_\_\_\_\_

Business Activity (NAICS) \_\_\_\_\_ NAICS Code (Optional) \_\_\_\_\_

What percent of the annual energy will be for agricultural end-uses? (Optional) \_\_\_\_\_%

Note: Please see PG&E's Electric Rule 1 for the complete qualification criteria for agricultural rates.

What type of crop/livestock are you producing? \_\_\_\_\_

Will Submersible Pump(s) be installed?  Yes  No

Operating Hours: Hours per day \_\_\_\_\_ Days per week \_\_\_\_\_ Typical daily operating hours: From \_\_\_\_\_ To \_\_\_\_\_

What months will this facility operate?

January

February

March

April

May

June

July

August

September

October

November

December

Describe other operating characteristics \_\_\_\_\_

Note: Please refer to PG&E's Gas and/or Electric Rules 2, 13, 15, 16, 1, 20, 21 and LS schedules for more information.

## 2D. Applicant Design and/or Installation Options

*(Applicable to New Service Requests, Permanent and Temporary)*

*As an applicant for new gas or electric service, you can choose either PG&E or a qualified Applicant Designer to design new PG&E gas/electric distribution and/or service facilities.*

Are you planning to use a qualified Applicant Design contractor?

Yes <sup>1 2</sup>       No

If yes, name of Applicant Design contractor (*Optional*) \_\_\_\_\_

*As an applicant for new gas or electric service, you can also choose either PG&E or a qualified contractor to construct all or a portion of new PG&E underground gas/electric distribution and/or service facilities.*

Are you planning to use an Applicant Install contractor?

Yes <sup>2</sup>       No

If answered yes to the above (using an Applicant Install contractor), are you planning to submit a competitive bid?

Yes <sup>3</sup>       No

Who will install the service wire?

PG&E       Contractor

Who will install the gas pipe?

PGE       Contractor

1. Please see the *Applicant Design Guide* for more information: [https://www.pge.com/en\\_US/residential/customer-service/home-services/renovating-and-building/applicant-design-and-installation-responsibilities/applicant-design-and-installation-responsibilities.page](https://www.pge.com/en_US/residential/customer-service/home-services/renovating-and-building/applicant-design-and-installation-responsibilities/applicant-design-and-installation-responsibilities.page)
2. You should become familiar with the applicant design and/or installation requirements in our *General Terms and Conditions*: [https://www.pge.com/tariffs/assets/pdf/tariffbook/ELEC\\_FORMS\\_79-716.pdf](https://www.pge.com/tariffs/assets/pdf/tariffbook/ELEC_FORMS_79-716.pdf).
3. If you are planning to submit a competitive bid, please be prepared to complete *Statement of Applicant's Contract Anticipated Costs (SACAC) Form No. 79-1003* per our *General Terms and Conditions* and refer to PG&E's Rule 15 and 16 to learn what costs should be included.



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## 2E. Self-Generation

If you are planning to install any self-generation equipment, photovoltaic, or wind generation, additional applications for interconnection to PG&E's electric system must be submitted and approved by PG&E prior to engineering for your new construction project. The information you provide on your generation interconnection application may affect the final PG&E design for your project.

For information on PG&E's net metering programs, including eligibility guidelines, generation interconnection program application forms, links to the California Public Utilities Commission, Energy Commission and the US Department of Energy, visit [www.pge.com/b2b/newgenerator/](http://www.pge.com/b2b/newgenerator/) or contact PG&E's Generation Interconnection Services at (415) 972-5676.

Are you installing any self-generation equipment as part of your project?  Yes  No

Generation Equipment (choose all that apply)	# of Units	Generation Output (kW)
Engine	_____	_____
Fuel Cell	_____	_____
Geothermal	_____	_____
Hydro	_____	_____
Micro Turbine	_____	_____
Solar PV	_____	_____
Solar Thermal	_____	_____
Steam Turbine	_____	_____
Storage	_____	_____
Turbine	_____	_____
Wind	_____	_____
Other	_____	_____
		Total Output _____ kW

## 2F. Telco Information

- Estimating Required?  Yes  No
- Equipment?  Pole Top Antenna  Mid-Mount / Comm Level
- Meter Type? (Optional)  Smart Pole Meter  Regular Smart Meter
- Does this project provide cellular service where none currently exists?  Yes  No
- Will this project resolve current cellular connectivity issue?  Yes  No
- Does this project have government funding with in-service deadlines?  Yes  No

### Project Structure (Optional)

- PG&E Owned Wood Pole  PG&E Owned Steel Pole  PG&E Owned Transmission Tower  Joint Pole
- Non-PG&E / City Owned Streetlight Steel Pole  Non-PG&E Owned Wood Pole

## 3A. Submitter (Party who is submitting the application)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Legal Status

- Individual  Gen Partnership  Corporation  Limited Liability Company (LLC)



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- Estate
- Joint Venture
- Limited Partnership
- Non-Profit Org
- Governmental Agency
- Sole Proprietor
- Unincorporated Association
- Other \_\_\_\_\_

Company Name (Optional) \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Day Phone \_\_\_\_\_ Ext (Optional) \_\_\_\_\_ Mobile Phone \_\_\_\_\_  
 Email Address \_\_\_\_\_

**3B. Primary (Party who will relay project information and updates to PG&E)**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Company name (Optional) \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Day Phone \_\_\_\_\_ Ext (Optional) \_\_\_\_\_ Mobile Phone \_\_\_\_\_  
 Email Address \_\_\_\_\_

**3C. Contractor (Optional)**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Company name (Optional) \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Day Phone \_\_\_\_\_ Ext (Optional) \_\_\_\_\_ Mobile Phone \_\_\_\_\_  
 Email Address \_\_\_\_\_



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### 3D. Legal (Party who will appear on the Contract / Authorized Signatory and is financially responsible for the project)

Title (Optional) \_\_\_\_\_ First Name \_\_\_\_\_ Initial (Optional) \_\_\_\_\_ Last Name \_\_\_\_\_

Legal Name to Appear on Contract \_\_\_\_\_

Legal Status

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> Individual          | <input type="checkbox"/> Gen Partnership | <input type="checkbox"/> Corporation                | <input type="checkbox"/> Limited Liability Company (LLC) |
| <input type="checkbox"/> Estate              | <input type="checkbox"/> Joint Venture   | <input type="checkbox"/> Limited Partnership        | <input type="checkbox"/> Non-Profit Org                  |
| <input type="checkbox"/> Governmental Agency | <input type="checkbox"/> Sole Proprietor | <input type="checkbox"/> Unincorporated Association | <input type="checkbox"/> Other _____                     |

State of Inc. or LLC \_\_\_\_\_

Company Name (Optional) \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Day Phone \_\_\_\_\_ Ext (Optional) \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Receive Contract and Invoices Electronically?  Yes  No

If No, Reason for Exemption

- |  |  |
|--|--|
| <input type="checkbox"/> Customer does not have access to a computer | <input type="checkbox"/> Customer does not have an email address |
| <input type="checkbox"/> Customer does not trust online transactions | <input type="checkbox"/> Customer prefers US Mail (paper-trail)  |
| <input type="checkbox"/> Internal Use Only                           | <input type="checkbox"/> For Studies Only                        |

### 3E. Energy Billing Contact Information (Party responsible for paying for energy use after installation) (Optional) New Services only

First Name \_\_\_\_\_ Initial (Optional) \_\_\_\_\_ Last Name \_\_\_\_\_

Name to appear on the bill \_\_\_\_\_

Legal Status

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> Individual          | <input type="checkbox"/> Gen Partnership | <input type="checkbox"/> Corporation                | <input type="checkbox"/> Limited Liability Company (LLC) |
| <input type="checkbox"/> Estate              | <input type="checkbox"/> Joint Venture   | <input type="checkbox"/> Limited Partnership        | <input type="checkbox"/> Non-Profit Org                  |
| <input type="checkbox"/> Governmental Agency | <input type="checkbox"/> Sole Proprietor | <input type="checkbox"/> Unincorporated Association | <input type="checkbox"/> Other _____                     |

State of Inc. or LLC \_\_\_\_\_

Company Name (Optional) \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Day Phone \_\_\_\_\_ Ext (Optional) \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Existing Electric Rate (Optional) \_\_\_\_\_ Desired Electric Rate (Optional) \_\_\_\_\_ NEM Rate (Optional) \_\_\_\_\_

Existing Gas Rate (Optional) \_\_\_\_\_ Desired Gas rate (Optional) \_\_\_\_\_

For additional information on rate options, visit <http://www.pge.com/myhome/myaccount/rateinfo/> or call 1-877-PGE-SRVC. If a rate is not selected, PG&E will select an applicable rate. For Agricultural applicants, an Agricultural rate must be selected before receiving service.

## PART 4: Construction Information

### 4A. General Construction Information

Will existing PG&E facilities require relocation or removal?  Yes  No Date needed \_\_\_\_\_

Do existing PG&E electric overhead facilities require undergrounding?  Yes  No Date needed \_\_\_\_\_

Construction Start Date \_\_\_\_\_



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## 4B. New Permanent Services

*This section is only applicable if underground trenching work is required, such as electric underground and/or gas.*

### 4B.1 Trenching Performed By (Electric / Gas)

Description		Performed by	
Gas Trenching Completion Date (Optional) _____			
Electric Trenching Completion Date (Optional) _____			
Gas	Distribution (Primary) Line Extension – Trench and Backfill	<input type="checkbox"/> PG&E	<input type="checkbox"/> Applicant
	Service Extension – Trench and Backfill	<input type="checkbox"/> PG&E	<input type="checkbox"/> Applicant
Electric	Distribution (Primary) Line Extension– Trench and Backfill	<input type="checkbox"/> PG&E	<input type="checkbox"/> Applicant
	Distribution (Primary) Line Extension– Conduits / Substructure Installation	<input type="checkbox"/> PG&E	<input type="checkbox"/> Applicant
	Service Extension – Trench and Backfill	<input type="checkbox"/> PG&E	<input type="checkbox"/> Applicant
	Service Extension – Conduits / Substructure Installation	<input type="checkbox"/> PG&E	<input type="checkbox"/> Applicant

*Note: There are Federal and State requirements for any individuals performing trenching for gas facilities. To learn more about the Qualification Requirements, go to [https://www.pge.com/en\\_US/for-our-business-partners/business-to-business/gas-pipeline-contractors/operator-qualifications.page](https://www.pge.com/en_US/for-our-business-partners/business-to-business/gas-pipeline-contractors/operator-qualifications.page) or call us at 855-854-6227, Option 4.*

*Have questions about which Operator Qualifications you need for the work your project requires? Contact your PG&E Inspector, your PG&E New Business Representative or your contractor. If further assistance is needed, please email the PG&E Contractor OQ Program Manager at [OQPgmMgr@pge.com](mailto:OQPgmMgr@pge.com).*

### 4B.2 Joint Trench Occupants (select all that apply)

Service		
<input type="checkbox"/> Electric	<input type="checkbox"/> Gas	<input type="checkbox"/> Phone
<input type="checkbox"/> CATV	<input type="checkbox"/> Not Sure	<input type="checkbox"/> Not Applicable
<input type="checkbox"/> Other	_____	

Distribution		
<input type="checkbox"/> Electric	<input type="checkbox"/> Gas	<input type="checkbox"/> Phone
<input type="checkbox"/> CATV	<input type="checkbox"/> Not Sure	<input type="checkbox"/> Not Applicable
<input type="checkbox"/> Other	_____	

Joint trench drawing to be prepared by  Applicant  PG&E  Not Applicable

*Notes: Water, sanitary sewer, storm drain, low pressure gas, oil or other fluid carrying piping or facilities or private utilities (e.g. fire alarm, private streetlight systems, private phone, private CATV or gate controllers) are not permitted in a PG&E occupied joint trench.*





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## 4C. Temporary Services

This section is applicable to New Temporary Services requests or New Permanent Services requiring additional Temporary Services.

Is Temporary Service Needed?  Yes  No

Date temporary service is needed Electric \_\_\_\_\_ Gas \_\_\_\_\_

Temporary Electric Service Type  Overhead  Underground

Will temporary service address be the same as project address?  Yes  No

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Cross Street (Optional) \_\_\_\_\_

Will Temporary Service power be operated for less than one year?  Yes  No

Temporary Electric Service Panel Rating (select one)

- 100 Amps       125 Amps       200 Amps       225 Amps       320 Amps
- 400 Amps       600 Amps       800 Amps       1200 Amps       1600 Amps
- 2000 Amps       2500 Amps       3000 Amps       4000 Amps       Other \_\_\_\_ Amps

Total Electric load \_\_\_\_\_ kW

Temporary Gas Service Delivery Pressure Requested

- ¼ psig       ½ psig       1 psig       2 psig       Other \_\_\_\_ psig

Total Gas Load \_\_\_\_\_ Btu/h

Description		Performed by	
Gas	Service extension – trench and backfill	<input type="checkbox"/> PG&E	<input type="checkbox"/> Applicant
Electric	Distribution (Primary) Line Extension– Trench and Backfill	<input type="checkbox"/> PG&E	<input type="checkbox"/> Applicant
	Distribution (Primary) Line Extension– Conduits / Substructure Installation	<input type="checkbox"/> PG&E	<input type="checkbox"/> Applicant
	Service Extension – Trench and Backfill	<input type="checkbox"/> PG&E	<input type="checkbox"/> Applicant
	Service Extension – Conduits / Substructure Installation	<input type="checkbox"/> PG&E	<input type="checkbox"/> Applicant
	Electric Service Pole Installation	<input type="checkbox"/> PG&E	<input type="checkbox"/> Applicant

Note: There are Federal and State requirements for any individuals performing trenching for gas facilities. To learn more about the Qualification Requirements, go to [https://www.pge.com/en\\_US/for-our-business-partners/business-to-business/gas-pipeline-contractors/operator-qualifications.page](https://www.pge.com/en_US/for-our-business-partners/business-to-business/gas-pipeline-contractors/operator-qualifications.page) or call us at 855-854-6227, Option 4.

Have questions about which Operator Qualifications you need for the work your project requires? Contact your PG&E Inspector, your PG&E New Business Representative or your contractor. If further assistance is needed, please email the PG&E Contractor OQ Program Manager at [OQPgmMgr@pge.com](mailto:OQPgmMgr@pge.com).

Trenching Completion Date (Optional) \_\_\_\_\_

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**5A. Existing Service**

 Main Panel Rating (*select one*)

- |                                    |                                    |                                    |                                    |                                      |
|------------------------------------|------------------------------------|------------------------------------|------------------------------------|--------------------------------------|
| <input type="checkbox"/> 100 Amps  | <input type="checkbox"/> 125 Amps  | <input type="checkbox"/> 200 Amps  | <input type="checkbox"/> 225 Amps  | <input type="checkbox"/> 320 Amps    |
| <input type="checkbox"/> 400 Amps  | <input type="checkbox"/> 600 Amps  | <input type="checkbox"/> 800 Amps  | <input type="checkbox"/> 1200 Amps | <input type="checkbox"/> 1600 Amps   |
| <input type="checkbox"/> 2000 Amps | <input type="checkbox"/> 2500 Amps | <input type="checkbox"/> 3000 Amps | <input type="checkbox"/> 4000 Amps | <input type="checkbox"/> Other _____ |

Distribution Voltages		
1Ø Secondary	3Ø Secondary	3Ø Primary
<input type="checkbox"/> 120/240 Volt, 3-Wire	<input type="checkbox"/> 240/120 Volt, 4-Wire	<input type="checkbox"/> 2,400 Volt, 3-Wire
<input type="checkbox"/> 120/208 Volt, 3-Wire	<input type="checkbox"/> 240 Volt, 3-Wire	<input type="checkbox"/> 4,160 Volt, 3-Wire
	<input type="checkbox"/> 480 Volt, 3-Wire	
	<input type="checkbox"/> 208Y/120 Volt, 4-Wire	<input type="checkbox"/> 4,160Y/2,400 Volt, 4-Wire
	<input type="checkbox"/> 480/277 Volt, 4-Wire	<input type="checkbox"/> 12,000 Volt, 3-Wire
	<input type="checkbox"/> 480Y/277 Volt, 4-Wire	<input type="checkbox"/> 12,000Y/6,930 Volt, 4-Wire
		<input type="checkbox"/> 17,200 Volt, 3-Wire
		<input type="checkbox"/> 20,780 Volt, 3-Wire
		<input type="checkbox"/> 20,780Y/12,000 Volt, 4-Wire
		<input type="checkbox"/> Other _____

Panel Attachment Location ( <i>select one</i> )	Service Source ( <i>select one</i> )	Service Crossings ( <i>select all that apply</i> )
<input type="checkbox"/> House	<input type="checkbox"/> Mid-span wire	<input type="checkbox"/> Agriculture field
<input type="checkbox"/> Meter pedestal	<input type="checkbox"/> Pole	<input type="checkbox"/> Building or structure
<input type="checkbox"/> Other residence on same property	<input type="checkbox"/> Not sure	<input type="checkbox"/> Deck
<input type="checkbox"/> Pole		<input type="checkbox"/> Neighbor's fence or property
<input type="checkbox"/> Panel Board		<input type="checkbox"/> Private road
<input type="checkbox"/> Pump house		<input type="checkbox"/> Public road
<input type="checkbox"/> Shop / Garage		<input type="checkbox"/> Swimming pool
<input type="checkbox"/> Not sure		<input type="checkbox"/> Trolley / Rail tracks
		<input type="checkbox"/> Not sure applicable
		<input type="checkbox"/> Not applicable
		<input type="checkbox"/> None

Is the proposed service voltage equal to the existing voltage? Yes \_\_\_\_\_ No \_\_\_\_\_



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**5B. Proposed Service**

Voltage Level    Primary \_\_\_\_\_    Secondary \_\_\_\_\_    Transmission \_\_\_\_\_

Main Panel Rating (*select one*)

- |                                    |                                    |                                    |                                    |                                      |
|------------------------------------|------------------------------------|------------------------------------|------------------------------------|--------------------------------------|
| <input type="checkbox"/> 100 Amps  | <input type="checkbox"/> 125 Amps  | <input type="checkbox"/> 200 Amps  | <input type="checkbox"/> 225 Amps  | <input type="checkbox"/> 320 Amps    |
| <input type="checkbox"/> 400 Amps  | <input type="checkbox"/> 600 Amps  | <input type="checkbox"/> 800 Amps  | <input type="checkbox"/> 1200 Amps | <input type="checkbox"/> 1600 Amps   |
| <input type="checkbox"/> 2000 Amps | <input type="checkbox"/> 2500 Amps | <input type="checkbox"/> 3000 Amps | <input type="checkbox"/> 4000 Amps | <input type="checkbox"/> Other _____ |

If requesting a change in voltage or a new service (*select one*)

Distribution Voltages		
1Ø Secondary	3Ø Secondary	3Ø Primary
<input type="checkbox"/> 120/240 Volt, 3-Wire	<input type="checkbox"/> 240/120 Volt, 4-Wire	<input type="checkbox"/> 2,400 Volt, 3-Wire
<input type="checkbox"/> 120/208 Volt, 3-Wire	<input type="checkbox"/> 240 Volt, 3-Wire	<input type="checkbox"/> 4,160 Volt, 3-Wire
	<input type="checkbox"/> 208Y/120 Volt, 4-Wire	<input type="checkbox"/> 4,160Y/2,400 Volt, 4-Wire
	<input type="checkbox"/> 480/277 Volt, 4-Wire	<input type="checkbox"/> 12,000 Volt, 3-Wire
	<input type="checkbox"/> 480Y/277 Volt, 4-Wire	<input type="checkbox"/> 12,000Y/6,930 Volt, 4-Wire
		<input type="checkbox"/> 17,200 Volt, 3-Wire
		<input type="checkbox"/> 20,780 Volt, 3-Wire
		<input type="checkbox"/> 20,780Y/12,000 Volt, 4-Wire
		<input type="checkbox"/> Other

Transmission Voltages 3Ø
<input type="checkbox"/> 60,000 Volt, 3-Wire
<input type="checkbox"/> 70,000 Volt, 3-Wire
<input type="checkbox"/> 115,000 Volt, 3-Wire
<input type="checkbox"/> 230,000 Volt, 3-Wire

Transformer type requested

*(Only for New Permanent Services, Electric underground, Agriculture, Commercial, Industrial and Residential Sub-division)*

- Pad-mounted       Subsurface <sup>1</sup> (*additional Special Facilities charges may apply*)

**5C. Electric Vehicle** (*This section is only applicable to Commercial Electric Vehicle charging station requests.*)

Are you planning to install an EV Charging Station?     Yes       No

Total Number of Charge Ports \_\_\_\_\_    Maximum Capacity of Each Port \_\_\_\_\_    Total Maximum Load \_\_\_\_\_

Solar / Energy Storage (e.g., battery) installed as part of the Electric Vehicle System     Yes     No

Max Peak Load Connected to PG&E System \_\_\_\_\_(kW)

Describe Other Operating Characteristics (*Optional*) \_\_\_\_\_

<sup>1</sup> Subsurface equipment subject to review and Rule 2, 15, and 16.



# APPLICATION FOR NEW SERVICE OR PROJECT

Project Number \_\_\_\_\_

## 5D. Streetlights

Are you installing or removing streetlights?

Yes  No

Number of Streetlights to be Added \_\_\_\_\_

Number of Streetlights to be Removed \_\_\_\_\_

Will Lights be Metered?  Yes  No

Who Will Own and Maintain the Lights?  PG&E  Applicant or Applicant transitioning to Agency

Streetlight pole ownership  PG&E Distribution Poles  
 PG&E streetlight only poles  
 Customer owned streetlight only poles

Lighting style  Cobrahead (Standard LED)  
 Cobrahead Other LED  
 Decorative & Area LED  
 Other Style \_\_\_\_\_

Select Color Temperature, Wattage & Quantity

LED 4000K	Quantity
26W	
33W	
53W	
56W	
65W	
78W	
122W	
N/A other	N/A
Total	

LED 3000K	Quantity
28W	
36W	
53W	
60W	
69W	
83W	
136W	
N/A	N/A
Total	

LED 2700K	Quantity
15W	
32W	
42W	
50W	
61W	
75W	
83W	
N/A	
Total	

Total Quantity \_\_\_\_\_

Total Streetlight Wattage \_\_\_\_\_

Desired rate for streetlights (additional forms may be required)

LS1  LS2  OL1  LS3  Other \_\_\_\_\_

*Important Note: If a city or county does not accept ownership of the streetlights or ownership is submitted in the name of a Homeowners Association, the applicant must apply for the LS-3 rate schedule. The LS-1 or OL-1 rates can be requested for streetlights that are located on private property. For LS-2 city or county owned streetlights, a letter will be required from the city/county accepting ownership of the streetlights, which includes the date of acceptance and states they will be responsible for the billing. Until the letter is received and dated with the city/county acceptance, the billing will be placed in the applicant's name and billed according to the rate schedule requested once the lights have been energized.*

Bill Streetlight Usage to:  Same Account (Energy Billing contact)  Different account (existing)  New Account

Account number (if existing) \_\_\_\_\_

Please also provide either a phone number or meter number for verification purposes:

Phone Number \_\_\_\_\_

Meter number \_\_\_\_\_

New Account Information: First name \_\_\_\_\_ Last name \_\_\_\_\_

Company name (optional) \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Day phone \_\_\_\_\_ Ext(optional) \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Email Address \_\_\_\_\_



# APPLICATION FOR NEW SERVICE OR PROJECT

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## 5E. Electric Load Information (Optional)

We assume the following standard sized electric appliances: *Electric Dryer, Electric Range, Lighting, Refrigeration, Electric Stove*

Description of Appliance	# of Appliances	Phase		Connected Load	Units	Largest Load
Air Conditioning	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	tons	_____
Arc Welders	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	_____
Area Lighting	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Cooking	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Electric Dryer	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Electric Radiant Heating	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Electric Oven	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Electric Stove	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Exhaust Fan	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	_____
Heat Pump(s)	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	tons	_____
Hot Tub Heater	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Hot Tub Pump	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	hp	_____
Lighting (indoor)	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Lighting (outdoor)	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Misc. 1Ø Motors	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	hp	_____
Misc. 3Ø Motors	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	hp	_____
Natural Gas Vehicle Compressor	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	hp	_____
On-Demand Water Heaters	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Plug-In Electric Vehicle	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Receptacles	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Refrigeration	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Resistance Welders	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Sauna	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Sprinkler/Irrigation Controls	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Standard Water Heaters	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Swimming Pool Pump	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	hp	_____
Swimming Pool Water Heater	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Temp Power (non-motor)	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	kW	N/A
Temp Power (motor)	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	hp	_____
Well Pump(s)	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	hp	_____
Other	_____	<input type="checkbox"/> 1Ø	<input type="checkbox"/> 3Ø	_____	_____	_____

TOTAL LOAD \_\_\_\_\_

Common Usage Area (select all that apply)

- |  |  |  |                                    |
|--|--|--|------------------------------------|
| <input type="checkbox"/> Lift Station  | <input type="checkbox"/> Club House      | <input type="checkbox"/> Sprinklers                    | <input type="checkbox"/> Park Site |
| <input type="checkbox"/> Area Lighting | <input type="checkbox"/> Street Lighting | <input type="checkbox"/> Other Common Usage Area _____ |                                    |



# APPLICATION FOR NEW SERVICE OR PROJECT

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## PART 6: Gas Information

### 6A. Permanent Services

Gas Service Delivery Pressure Requested   
 ¼ psig   
 ½ psig   
 1 psig   
 2 psig   
 Other \_\_\_\_psig

### 6B. Gas Load Information (Optional)

*For Permanent New Services and added load requests. If additional space is required, please attach a spreadsheet using same format as below.*

Description of Appliance	# of Appliances	mBtu/h Each	Total mBtu/h
A/C	_____	_____	_____
Air Conditioning	_____	_____	_____
Backyard (Range/Oven/BBQ/Patio Heater)	_____	_____	_____
Boilers	_____	_____	_____
Cooking	_____	_____	_____
Dryer	_____	_____	_____
Fire Pit	_____	_____	_____
Furnace	_____	_____	_____
Gas Oven	_____	_____	_____
Gas Range	_____	_____	_____
Generator	_____	_____	_____
Laundry Dryer	_____	_____	_____
OnDemand Gas Wtr Heating	_____	_____	_____
Pool/Spa	_____	_____	_____
Space Heating (new)	_____	_____	_____
Tankless Water Heater	_____	_____	_____
Water Heater	_____	_____	_____
Other _____	_____	_____	_____
		Total Gas Load _____	_____ mBtu/h

*Natural gas standard service delivery pressure is provided at ¼ psig (7" water column). Requests for elevated service delivery pressure require PG&E's review and approval. If granted, elevated service delivery pressure may be reduced at any time due to PG&E operational needs. Special facilities costs and cost-of-ownership charges may apply for elevated service delivery pressure. For further information, contact your local PG&E office and refer to Gas Rule 2. MBtu/h = 1,000 Btu/h.*

**Do NOT install your gas house line until the meter location is approved by PG&E.**

*In the event that applicant shall make any material change either in the amount or character of the appliances or apparatus installed upon the premises to be supplied by PG&E, including panel size, applicant shall immediately give PG&E written notice of this fact.*

## PART 7: Documents

Based on the facility type, please include the following required documents (marked ) with your application. When PG&E reviews your application, additional documents (unchecked ) may be required. "na" indicates this document is not usually applicable for this facility type. Please see the next page for a description of what information you should include in your documents.

*Note: The applicant is responsible for identifying all environmental requirements within said permits, approvals and/or conditions.*

Document Type	New Service					Upgrade or Change to Existing Service			
	Single Family Residential	Residential Subdivision	Commercial/Industrial	Agricultural	Telecommunications	Single Family Residential	Commercial/Industrial	Agricultural	Telecommunications
	By Facility Type					By Facility Type			
Building Floorplan and/or Elevations <sup>1</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	na
Detailed Site Plan <sup>2</sup>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Equipment Schedules <sup>3</sup>	na	na	<input checked="" type="checkbox"/>	<input type="checkbox"/>	na	na	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Landscaping Plan <sup>4</sup>	na	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	na	na	na	na	na	na
Panel Photographs <sup>5</sup>	na	na	na	na	na	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Panel Schedule <sup>6</sup>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Parcel Map <sup>7</sup>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	na	na	na	na
Plumbing Plan	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	na	na	<input type="checkbox"/>	<input type="checkbox"/>	na	na
Pole Loading Calculations	na	na	na	na	<input checked="" type="checkbox"/>	na	na	na	<input type="checkbox"/>
Single Line Drawing <sup>8</sup>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	na
Site Improvement Plan <sup>9</sup>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	na	na	na	na	na
Streetlight and Traffic Signal Plan	na	<input checked="" type="checkbox"/>	<input type="checkbox"/>	na	na	na	na	na	na
Tower Owner Letter <sup>10</sup>	na	na	na	na	<input checked="" type="checkbox"/>	na	na	na	<input type="checkbox"/>
Tract Map <sup>11</sup>	na	<input checked="" type="checkbox"/>	na	na	na	na	na	na	na
Absolving Service Agreement	na	na	na	na	<input type="checkbox"/>	na	na	na	na
Building Permit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
City Circuit Diagram <sup>12</sup>	na	na	na	na	<input type="checkbox"/>	na	na	na	na
Civil Plans (for UG Only) <sup>13</sup>	na	<input type="checkbox"/>	<input type="checkbox"/>	na	<input type="checkbox"/>	na	na	na	na
Copies of Environmental Permits and/or conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	na	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	na
County or City-Approved Plot Plan <sup>14</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	na	na	na	na	na	na
Exhibit A	na	na	na	na	<input type="checkbox"/>	na	na	na	na
GPR Value <sup>15</sup>	na	na	na	na	<input type="checkbox"/>	na	na	na	na
Joint Pole Form 2	na	na	na	na	<input type="checkbox"/>	na	na	na	na
Lease <sup>16</sup>	na	na	na	na	<input type="checkbox"/>	na	na	na	na
Miscellaneous Documents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Satellite View <sup>17</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Streetlight and traffic signal plans	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	na	na	na	na	na	na
Title 24 Utility Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	na	na	<input type="checkbox"/>	<input type="checkbox"/>	na	na

**Required Document Content**

**1. Building Floorplan and/or Elevation**

Residential: (may be satisfied by Item 2. below)

Agricultural: needed for larger than 200 amp Panel

Commercial/Industrial: provide a separate document for building elevations

Telco: Varies by job type

- a. Cable TV/Internet Pole Mounted Meters - All existing and new equipment with HOAs and Side by side existing and proposed elevation views
- b. Cable TV/Inter Pad Mounted Meters - View of all equipment cabinets and panels with dimensions in all directions
- c. Macro Cells - Cell Tower Mounted - All existing and new equipment with HOAs, Cell Tower type, Side by side existing and proposed elevation views
- d. Macro Cells - Non-Cell Tower Mounted - All existing and new equipment with HOAs, Structure type, Side by side existing and proposed elevation views
- e. Macro Cells - Meter Set Only/Added Load- If underground work is required, Entire metering configuration with section/panel breaker ratings
- f. Macro Cells - Electric Transmission Towers - All existing and new equipment with HOAs, Structure type, Side by side existing and proposed elevation views
- g. For All Small Cells (Small Cells-Jointly Owned Wood Pole with PG&E, Mid-Mount, Pole Top, Small Cells-PG&E Solely Owned Wood Pole, Non-PG&E Customer Owned Wood Pole, PG&E Owned Metal Streetlight, Non-PG&E Owned Metal Streetlight) - All existing and new equipment with HOAs, Side by side existing and proposed elevation views.

**2. Detailed Site Plan**

Residential Site Plans to include roads, sidewalks, driveways, location of fire hydrants and other structures, proposed location of gas and electric meters, building elevations, and proposed future improvements. (Meter locations are subject to PG&E approval.)

Commercial/Industrial: Complete set of site improvement plans, including grading plans. (Include 3 1/2" high-density disk with AutoCAD 2000i.dwg file of the site plan.)

Agricultural: showing roads, utility pole lines, driveways, easements, rights-of-way, property lines, building and structure.

Telco: Include customer proposed service route from power source to panel/meter (also overlaid on parcel maps, and indicate distance in feet, Indicate type and location of PG&E POC (e.g. existing pole mounted transformer or pad mounted transformer)

**3. Equipment Schedule**

Agricultural/Commercial/Industrial/Telecom: Schedules with complete breakdown of equipment for added loads, including electric vehicle charging

**4. Landscaping Plans**

Include sprinkler controller meter location

**5. Panel Photographs**

- a. Existing panel (in open position)
- b. Main panel rating
- c. Working space and wall space
- d. Service path
- e. Connection point
- f. Proposed Panel Location (if relocating)

**6. Panel Schedule**

A complete breakdown of equipment for added loads, including electric vehicle charging, if applicable

**7. Parcel Map**

Single Family Residential, Commercial/Industrial: Assessor's Parcel Map showing all easements, rights-of-way, property lines, etc.

Telco: Indicate ROWs and PUEs; Indicate land ownership type, APN, and owner name; If easement will be required, indicate whether PG&E or customer will obtain

**Required Document Content**



8. Single Line Drawing  
Commercial/Industrial: Electric drawings up to the meter, if new service, a written description of switchgear amperage size rating and number of meters, and electric switchboard drawings. (Must be approved by PG&E prior to manufacturing the main panel.)  
Telco: For underground projects: conduit size, Panel and main breaker amperages, Voltage; Mapping schematic showing path of cable to panel breakers and connected equipment
9. Site Improvement Plan  
Complete set of site improvement plans, including grading plans. Plans should include location of water, sewer, and storm drains. (Include 3 ½ "high-density disk with AutoCAD 2000i.dwg file of the site plan.)
10. Tower Owner Letter  
(Cell tower mounted Macro Cells Only) - description of the current state of electrical service and load at the tower; description of the requested/proposed electrical service and load, Tower location, Project identifying information (most typically the PG&E Application Number)
11. Tract Map showing all easements, rights-of-way, property lines, etc.
12. City Circuit Diagram - (Small Cells - non-PG&E owned metal streetlight) - Existing municipality owned cable from PG&E delivery point to end of light circuit with proposed antenna/meter pole called out, Include GPS coordinates for PG&E delivery point and proposed antenna/meter pole, Include any proposed circuit breaks or rerouting, if applicable include OH PG&E service from PG&E pole to light pole (does not necessarily apply to all municipalities)
13. Civil Plans (Underground Only)  
Show all underground utilities or other underground infrastructure in the excavation/boring area (and immediate surrounding areas)
14. City Approved Plot Plan  
One copy of the county or city approved plot plan with assigned address is required to establish the PG&E account
15. GPR Value (Macro Cells - electric transmission towers) (No explanatory doc, refer to 068179 standard)
16. Lease  
Ensure the following information is legible in the lease documents: Electric utility language, Location Information, Term of Lease, Lessor and Lessee mailing addresses, Exhibits (map of leased area), If easement will be required indicate whether PG&E or customer will obtain
17. Satellite View - Photo or satellite view of area where new switchgear is proposed.



# APPLICATION FOR NEW SERVICE OR PROJECT

Project Number \_\_\_\_\_

## PART 8: Agreement to Pay and Signature

I understand that service will be engineered and installed based upon the information provided here. I agree to pay PG&E, on demand, for all work PG&E performs and all costs PG&E incurs for this application for service. PG&E may cancel this Application for Service (a) if the application is incomplete and I do not provide all necessary supporting documents and project data after being notified by PG&E, (b) if I fail to provide an engineering advance within ninety days after one is requested by PG&E, or (c) if PG&E sends a proposed contract and I do not return the contract, with the required payment, within ninety days. If the project is postponed or cancelled, by either party, I will pay PG&E for all such work and costs incurred by PG&E prior to the postponement or cancellation.

PG&E's costs may include, for example, labor, material and supplies, (including long lead time materials), transportation, and other direct costs which PG&E allocates to such work. Incomplete information or any changes made at my request during the engineering, or after it is completed, will subject me to additional charges and may delay the establishment of service. I further agree to pay for any damage to new or existing PG&E facilities caused by my contractors or me. Service shall be subject to all of PG&E's applicable tariff schedules on file with and authorized by the California Public Utilities Commission (CPUC) and shall at all times be subject to such changes or modifications as the CPUC may direct from time to time in the exercise of its jurisdiction.

I understand that PG&E may require an engineering advance to cover some or all of its costs for project review, design work and cost development in connection with this application for service. I understand that any advance will be based upon current costs and the amount of work anticipated by PG&E based upon the information submitted in this application. I understand that any advance will be credited against the amount I owe, applied to the amount I may owe on the resulting line extension agreement, or refunded to me without interest when PG&E has completed its engineering work or if the project has been cancelled or postponed.

I have read the above information. I understand and agree with the provisions and my responsibilities.

Applicant's Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

*First Name, Middle Initial, Last Name*