Appendix M – RMLD

LOAD DATA SHEET
RMLD LOAD DATA SHEET

Please Attach Two Copies of Site Plan

One Per Building/Lot

Please be as specific as possible

Facility Name: __________________________
Address: ______________________________

----- ELECTRIC SERVICE DATA -----

Service Request Type:  
- [ ] New Construction
- [ ] Existing
- [ ] Overhead to Underground Conversion

Construction:  
- [ ] Single Family
- [ ] Multi-Family
- [ ] Apartment
- [ ] URD
- [ ] Commercial
- [ ] Industrial
- [ ] Other

Electric Main:  
- [ ] 100 A
- [ ] 200 A
- [ ] 400 A
- [ ] 800 A

Number of Meters at this address: ___________
Unit ID: ____________________

Anticipated Service Date: ___________
Temporary Electric Service:  
- [X] Yes
- [ ] No

Electric Service Type:  
- [ ] Overhead
- [ ] Underground Primary
- [ ] Underground Secondary

Entrance Size (Amps): ___________A  
Conduit #: Dia: _____/_____
Conductor #: Size: _____/_____

Metering Comments: __________________________________________________________

Facility has a Total of _______ Sq-Ft of Floor Area on _______ Floors of Which _______ Sq-Ft is Area Comfort Conditioned
Basement/Attic/Other Living Space Not Included Above:  
- [X] No
- [ ] Yes

Facility Heated With:  
- [ ] Gas
- [ ] Electric

Facility Has _______ Tons of Cooling Capacity Using _______ Unit(s)

Service Entrance Pipe Size: _______ Inches

----- VOLTAGE AND LOAD DATA -----

Requested Service Voltage/Type

<table>
<thead>
<tr>
<th>Voltage/Type</th>
<th>OH</th>
<th>UG</th>
</tr>
</thead>
<tbody>
<tr>
<td>120/240V 1-Phase, 3 Wire</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>208/120V 3-Phase, 4-wire</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>240/120V 3-Phase, 4-wire</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>480/277V 3-Phase, 4-wire</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Other</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Data for the Largest Motor

<table>
<thead>
<tr>
<th>HP</th>
<th>Voltage/Motor</th>
<th>Phase</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Reduced Voltage Starting:  
- [X] Yes
- [ ] No

(Number Type If Yes)

Other, Describe: __________________________________________________________

----- CONTACT INFORMATION -----

Name: __________________________
Address: ______________________________

Cell Phone: ______________________ Alt: ____________________

Owner/Developer

Name: __________________________
Address: ______________________________

Cell Phone: ______________________ Alt: ____________________

Electrical Contractor

Daytime Phone: ______________________
Alt: ____________________

Name: __________________________
Address: ______________________________

City: _______ State: _______ ZIP: _______

----- COMMENTS/ ADDITIONAL INFORMATION -----

Comments: ______________________________

*Completed By: ______________________
Date: ____________________

Return To: RMLD
730 Ash St
Reading, MA 01867

Evaluatoe By: ______________________
Phone #: ______________________
RMLD Return Letter Date: ____________________

RETAIN THIS SHEET, FILE IT
WITH COMPLETED WORK ORDER
(PERMANENT FILE)