



Commercial Gas and Electric

Site information

Name _____ Requested installation date _____

Site address _____ City _____ State _____ ZIP _____

Owner information

Name _____ Mailing address _____

City _____ State _____ ZIP _____

Contact name _____ Phone (_____) _____ Email _____

Construction information

General contractor _____ Street address _____

City _____ State _____ ZIP _____

Project manager _____ Phone (_____) _____ Email _____

Job supervisor _____ Phone (_____) _____ Email _____

Mechanical contractor _____

Contact name _____ Phone (_____) _____ Email _____

Electrical contractor _____

Contact name _____ Phone (_____) _____ Email _____

Billing information

Who should receive monthly bills during construction?

Owner General contractor Heating contractor Electrical contractor

Will you need temporary construction heat? Yes No Temp heat load and pressure: _____

Will you need temporary electrical service? Yes No Single phase Three phase Overhead Underground

Service information

Electric service Overhead Underground Service size (amps) _____ Rewire? Proposed added load _____

Single phase Three phase Voltage _____ Electrical meter wall location North South East West # of feet from corner _____

Gas service

Pressure 6 or 7 inch w.c. 2 lb Other _____ Single tenant Multiple tenants # of meters _____

Gas meter wall location North South East West # of feet from corner _____

- Customer-owned facilities must be located and identified by customer, i.e., sprinkler, septic tank, drain field, etc.
- Indicate distance for meters from nearest corner of building.
- Inspection must be complete before service is energized.
- If no inspector, Proof of Compliance (electric) and/or Certificate of Compliance (gas) must be complete.
- Site must be within 4 to 6 inches of final grade (for new construction) and a clear 10-foot wide path from Xcel Energy source to meter.
- Winter construction charges may apply from 10/1 to 4/15.
- Water and sewer must be installed before electric and gas service.
- Charges may apply for preferred meter location and meter protection (bollards and ice shield).

PLEASE RETURN TO: Xcel Energy, Builders Call Line, 1518 Chestnut Avenue, Minneapolis, MN 55403

Fax number: **800.628.2521** Email: **BCLMN@xcelenergy.com**

Web address: **xcelenergy.com/BuildersandDevelopers**

For questions, please contact us at **BCLMN@xcelenergy.com** or **800.628.2121** (7 am to 5 pm Central Standard Time).

End uses

Equipment type	Gas (specify BTUs/hours input)	Electric (specify kW)	
Heating			Reg size / type _____ Orf. size _____
Water heating			Mtr # / size _____
Cooking			Mtr press / Corr fac _____
Air conditioning			Relief size / type / press _____
Clothes drying/Fireplace			Wall type _____
Lighting			Date completed _____ By _____
Motors			Notes _____
Total			

Heat source (check type) Forced air furnace Heat pump Heat storage Underfloor/slab heat Baseboard

Electric meter option (if applicable) Time of use Dual fuel Limited off-peak Saver's Switch

Sketch area



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