



1. Permanent Service Information

Lot & Block #: _____ Work Order #: _____
Name of Business: _____
Address: _____
City, State, Zip: _____

2. Billing Address – Required to initiate work order

Name on Account: _____ Tax Payer ID #: _____
Active Acct # w/ DLCO: _____
Address: _____
City, State, Zip: _____

3. Contact Information

Owner's Name: _____ Phone: () - e-mail: _____
Engineer: _____ Phone: () - e-mail: _____
Electrician: _____ Phone: () - e-mail: _____

4. Building Data

Area (Square ft.): _____ Hours of Use Per Month: _____

5. Electrical Requirements (check one)

- 120/208 volt, 3-phase, 4-wire 120/240 volt, 1-phase, 3-wire
 277/480 volt, 3-phase, 4-wire Other: _____

All voltages shown at <https://www.duquesnelight.com/docs/default-source/default-document-library/electrical-service-installation-rules.pdf#page=09>

6. Load Breakdown

Interior Lighting (kW): _____
Exterior Lighting (kW): _____
Resistance Heating (kW): _____
Air Conditioning (kW): _____
Cooking (kW): _____
Largest Motor (hp): _____
Special Loads (kW): i.e.,
X-ray, welders, etc _____
Elevator (hp): _____
Miscellaneous (kW): _____



7. Service Size

Amps: _____

Wire Size: _____

Requested Service Date:

8. On Site Generation

a.) Parallel: Yes No

What type of system(s) are you looking to install? _____

Do you know the proposed size (AC Output kW) of the system(s)? _____

b.) Non- Parallel: Yes No

What type of system(s) are you looking to install? _____

Do you know the proposed size (AC Output kW) of the system(s)? _____

9. Metering Requirements

Single Meter Multiple Meters Other: _____

Metering Location (meter and associated equipment, i.e. instrument transformers): _____

***Riser Diagram/Single Line required showing proposed metering setup for DLC review and approval

Will the metering be located inside of the switch gear? (Instrument transformers) Yes No

***If the metering will be located inside of the switch gear, drawings of the switchgear must be submitted for DLC approval

Will service be greater than 480 volts? (Primary metering) Yes No

***If the installation will be primary metered, additional drawings may be required for DLC approval

Please provide the contact information and address for the person responsible for signing any right-of-way agreements or legal documents if required to construct the electric service:

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____



Please provide the contact information, address, and e-mail address of the person who will receive the cost letter and/or invoice for the construction of the electric service:

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____
Email: _____

Please make sure that all checks are made out to 'Duquesne Light Company' and include the appropriate work order number so that payments are applied properly.

Additional Information for Consideration:

Please keep a copy of this form for your records.