



Utility Economic Development Association

Energy Usage Worksheet – Initial Inquiry

Please complete as fully as possible and send to UEDA member(s) of your choice.

Submission Date: ____/____/____

Section I
General Information

Requestor’s Data

Name: _____ Title: _____

Company: _____, Phone: ____/____ - _____

Please briefly describe nature of your business or specific need:

Project Information (for prospective customer)

Type of Operation: ___Manufacturing ___Distribution ___R & D ___Service ___Office

Is the project a new location or the expansion of an existing operation? _____

Will the project involve new construction or utilize an existing building? _____

What is/will be the total size of the facility? _____ sq. ft.

Is the company looking at specific properties?

If yes, where? _____

Once in full operation, days facility will operate: M-F from _____ (am/pm) to _____ (am/pm)

Sat. from _____ (am/pm) to _____ (am/pm)

Sun from _____ (am/pm) to _____ (am/pm)

Once in full operation, number of jobs to be created: _____

Section II
Electric Service

General Electric Requirements

Anticipated Peak Demand: _____ kW

Average monthly winter usage (Sept – May): _____ kWh (per month)

Anticipated winter Peak Demand (Sept – May): _____ kW

Average monthly summer usage (June - Aug): _____ kWh (per month)

Anticipated summer Peak Demand (June – Aug): _____ kW

Off-peak usage: _____ kWh per month, or _____ % (if known)

Load Factor (if known): _____ %

Power Factor: _____ % (if known)

Preferred Supply Voltage: _____ kV (if requested)

Preferred Delivery Voltage: _____ kV

Does Company require a dual feed? _____ (if yes, provide additional details)

Does Company require underground service? _____ (if yes, provide additional details)

Is customer interested in interruptible service? _____

Regarding transformation, Company will consider:

_____ paying a monthly transformation fee

_____ owning and operating their own transformers

Date permanent power needs to be available: ____/____/____

Date construction power needs to be available: ____/____/____

Electric Service Response

Is Company interested in an electric cost estimate? _____

Is Company interested in an explanation of how the facility will be served? _____

Is Company interested in an electric service extension cost estimate? _____

Other/Special Needs

Describe: _____

Section III
Natural Gas Service

General Natural Gas Requirements

Total usage: _____ Mcf per year, or _____ therms per year

Percentage of total annual usage for: process _____%, and space heating _____%

Estimated Maximum Daily Quantity (MDQ): _____ Mcf or therms per day

Peak hourly usage: _____ Mcf or therms per hour

Required delivery pressure _____ psig

Date gas service needs to be available: ____/____/____

Natural Gas Service Response

Is Company interested in a gas cost estimate? _____

Is Company interested in an explanation of how the facility will be served? _____

Is Company interested in a gas service extension cost estimate? _____

Other/Special Needs

Describe: _____

