



COMMERCIAL ELECTRIC LOAD DATA FORM

Return instructions: Please complete, sign, and return the form with any other supporting documentation to:
Email: customerservice@ocontoelectric.com
Mail: Oconto Electric Cooperative, PO Box 168, Oconto Falls, WI 54154
Fax: (920) 846-2025
Questions: Call (800) 472-8410 or email: customerservice@ocontoelectric.com

TYPE OF SERVICE REQUESTED: check all that apply

☐ New Service ☐ Upgrade TODAY'S DATE: _____

SITE INFORMATION:

Member/Company Name: _____ Project Address: _____
Company Providing Data: _____ Contact Person/Title: _____
Phone: _____ Cell Phone: _____ E-mail Address: _____
Number of Meters at this Address: _____ Unit Labeling: _____
(i.e. Suites 300-308, Apts. 101-30, Units 1-4, or A, B, C)
Business Type: _____

New Service Size (Amps): ☐ 100 ☐ 200 ☐ 320 ☐ 400 ☐ 600 ☐ 800 ☐ 1200 ☐ 1600 ☐ 2000 Building Sq. Ft. _____

CT Metering Location (If applicable): ☐ On Transformer ☐ On Building

New Voltage: ☐ Single Phase 120/240 ☐ Three Phase 120/208 ☐ Three Phase 277/480

IF UPGRADING – Existing Service Type: _____ Existing Service Size (Amps): _____

Existing Voltage: _____

MOTOR LOAD: (Please list all motors that are 5 HP or greater separately. Motors less than 5 HP can be grouped together)

Equipment Description	# of Motors	Size of Motors (HP)	1 or 3 Phase	Soft Start/Variable Frequency Drive

ELECTRIC LOAD:

Description	KW	1 or 3 Phase
Lighting (indoor)		
Lighting (outdoor)		
Air Conditioning/Heat Pump		
Ventilation (other than A/C)		
Refrigeration Equipment		
Receptacles		
Electric Heat		

WELDERS:

# of Welders	Amps	Volts

To the best of my knowledge, the above data is accurate. I am the legal property owner/representative for the above company/address, and if the electric load changes, it is our/my responsibility to let Oconto Electric Cooperative know. If the equipment needs to be upgraded due to an increase in my load, then the member would be responsible for any charges that would be incurred.

Signature: _____ Date: _____