



PSNH Contractor Work Sheet

Toll Free Telephone: (1-800-362-7764)

Internet: www.psnh.com

CONTRACTOR INFORMATION

| | | | | |
|-------------------------|----|-----------|--------------------------------|----------------|
| FIRST NAME | MI | LAST NAME | ELECTRICAL CONTRACTOR LIC. NO. | STATE |
| BUSINESS NAME | | | TELEPHONE NO. | CELL PHONE NO. |
| ADDRESS (NO. & STREET) | | | CITY/TOWN | ZIP CODE |

CUSTOMER INFORMATION

| | | | |
|------------------------|----|-----------|------------------------------|
| FIRST NAME | MI | LAST NAME | EXISTING METER MAKE AND NO. |
| BUSINESS NAME | | | TELEPHONE NO. CELL PHONE NO. |
| ADDRESS (NO. & STREET) | | | CITY/TOWN ZIP CODE |

CONSTRUCTION CHARGES BILLABLE TO: CONTRACTOR CUSTOMER

BILLING ADDRESS

| | | | |
|------------------------|-----------|-------|----------|
| ADDRESS (NO. & STREET) | CITY/TOWN | STATE | ZIP CODE |
|------------------------|-----------|-------|----------|

JOB LOCATION

| | | | | |
|--------------|---------|--------|--------------|---------------|
| BUILDING NO. | LOT NO. | STREET | CROSS STREET | LANDMARK |
| CITY/TOWN | | | ZIP CODE | POLE/PAD/H.H. |

JOB DESCRIPTION

DESCRIPTION OF WORK:

SERVICE TYPE
 CHANGE NEW TEMPORARY RELOCATION OTHER

TYPE OF BUILDING
 NEW EXISTING ADDITION

TYPE OF USE
 COMMERCIAL INDUSTRIAL RESIDENTIAL SUBDIVISION

SWITCH SIZE (AMPS) NO. OF METERS REQ. EXISTING SERVICE OR PROPOSED SERVICE
 OVERHEAD UNDERGROUND

SERVICE DATA

BUILDING SIZE (SQUARE FEET)

CONDUCTOR SIZE

| | | |
|-------|------|---------|
| PHASE | WIRE | VOLTAGE |
|-------|------|---------|

PRIMARY HEAT
 OIL GAS ELECTRIC GEOTHERMAL
 OTHER

CENTRAL AIR
 YES NO

| LOAD BREAKDOWN | KW CONNECTED |
|----------------------------------|--------------|
| Lighting | |
| Motors (Except AC) | |
| Air Conditioning | |
| Electric Heat | |
| Electric Heat Pump | |
| Largest Motor | |
| Solar Heat | |
| Range | |
| Electric WH - Controlled by PSNH | |
| Electric WH - Uncontrolled | |
| Solar WH - Electric Supp. | |
| Dryer | |
| Other 1 | |
| TOTAL: | |

Your Job Information:

MUNICIPAL/STATE PERMIT NO.

PSNH WORK REQUEST NO.

PSNH FIELD TECHNICIAN

DATE SUBMITTED

JOB NOTES & SKETCH

ESTIMATE DETAILS