



**Brainerd Public Utilities**  
 8027 Highland Scenic Road  
 P O Box 373  
 Brainerd MN 56401-0373  
 Phone (218) 829-2193  
 Fax (218) 829-2308

**ELECTRIC  
 SERVICE APPLICATION**

**RESIDENTIAL**

SERVICE ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_

BUILDER \_\_\_\_\_ PHONE \_\_\_\_\_

ELECTRICAL CONTRACTOR \_\_\_\_\_ PHONE \_\_\_\_\_

ESTIMATED COMPLETION DATE OF DWELLING \_\_\_\_\_

**TEMPORARY SERVICE** 1-PHASE AMPS \_\_\_\_\_

BILL TO: \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**PERMANENT SERVICE** 1-PHASE AMPS \_\_\_\_\_ UNDERGROUND/OVERHEAD

BILL TO: \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

- SINGLE FAMILY     TOWNHOME     OTHER \_\_\_\_\_     A/C     DUAL FUEL     OFF PEAK  
 MODULAR HOME     TWINHOME     ELECTRIC HEAT     OTHER \_\_\_\_\_

**UPGRADE SERVICE** RESIDENTS NAME \_\_\_\_\_ AMPS \_\_\_\_\_

- OVERHEAD     UNDERGROUND     OVERHEAD TO UNDERGROUND     METER PULL ONLY

WILL CALL    DISCONNECT DATE \_\_\_\_\_ TIME \_\_\_\_\_

**(48 HRS NOTICE)** RECONNECT DATE \_\_\_\_\_ TIME \_\_\_\_\_ (AFTER INSPECTION HOMEOWNERS ONLY)

THE UNDERSIGNED ACKNOWLEDGES THAT THE ABOVE INFORMATION IS CORRECT AND THAT ALL WORK IS DONE IN COMPLIANCE WITH BPU'S ELECTRIC SERVICE RULES AND REGULATIONS. ANY EXCEPTIONS MUST BE PREAPPROVED.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

OFFICE USE ONLY

DEPOSIT RECEIVED \_\_\_\_\_ PROJECT # \_\_\_\_\_ EASEMENT Y/N \_\_\_\_\_

METER # INSTALLED \_\_\_\_\_ WORK ORDER # \_\_\_\_\_ WATER REMOTE REQUIRED Y/N \_\_\_\_\_

TEMPORARY AFFIDAVIT # \_\_\_\_\_ DATE REC'D \_\_\_\_\_

PERMANENT AFFIDAVIT # \_\_\_\_\_ DATE REC'D \_\_\_\_\_

COPIES TO:  BILLING     METER TECH     DISPATCHER     ELEC SUPERVISOR     ELEC INSPECTOR