INSTRUCTIONS FOR PREPARING APPLICATIONS FOR ELECTRIC SERVICE & METER

Please refer to the sample application while reviewing the following notes. The letters below correspond with those on the sample. **NOTE:** THE “BLANK” FORM IS BELOW THE “SAMPLE” FORM

A. After reading the instructions at the top of the application, locate the PECO regional office in which the service is requested. Check the appropriate box and mail or fax the completed application to the appropriate regional office. **Note the change in contact information for New Residential Construction, effective May, 2010.**

B. Complete the fields for customer’s name and service location. Customer’s Driver’s License Number or Social Security Number is now required.

Note: (*) Include PECO Energy pole # and/or Lot # only if applicable.

(**) Use the address of the service when applying for underwriter’s inspection.

C. Complete the fields for customer’s PECO billing address or account number (within last 60 days).

D. Complete fields regarding you as the electrician or contractor, and indicate where you would like the reply sent. The Electrician/Builder Tax Identification number is now required. Also, please include the date you would like the reply returned to you.

E. Indicate your current construction status, and include the date PECO service is requested. Please avoid using “as soon as possible”.

F. thru J. Indicate the following:

- Type of Request
  **NOTE:** As of May 2010, this form is now required for “make-safe” and “demolition” requests. These options have been added to the form.
- Type of Service (include number of units and area per unit)
- Service Characteristics
- Meter Information
- Heating/Air Conditioning

K. Complete the table concerning the load characteristics of the service. For each applicable type of load, provide: 1) Connected KW, 2) Maximum Summer KW Demand, and 3) Maximum Winter KW Demand.

L. Complete the table concerning motor information.

M. If compensated metering will be used, indicate totalizer and general load (KW).

N. Include any additional comments.

O. Application MUST be signed and dated. Forms Rev. 5/10
PECO
Application for Electric Service & Meter
M-24175 (front) Rev. 5/10

INSTRUCTIONS:
Please complete the front page of this request and return to the PECO Regional Office (listed below) in the area service is required. Incomplete information may result in a delay in processing.

All work must comply with PECO Electric Service Requirements manual and be inspected by an approved inspection agency. (City of Philadelphia requests may be shared with Licenses & Inspections). Not all service voltages are available in all areas. Before purchasing electrical equipment or proceeding with any wiring, information regarding service availability and meter location should be obtained from the company.

A credit application and agreement must be completed if the customer has not had PECO service within the last 60 days. The company reserves the right to cancel this request if no further communication is received from the customer within 90 days of PECO's response date.

NEW BUSINESS SERVICES (1-800-454-4100) http://www.peco.com

PHILADELPHIA COUNTY
830 S. Schuylkill Ave.
Phila, PA 19146-2395
(215) 731-2340
Fax # (215) 731-2327

DELAWARE & CHESTER COUNTIES
1050 W. Swedesford Rd.
Bryn, PA 19312
(610) 725-7160
Fax # (610) 725-1416

BUCKS & MONTGOMERY COUNTIES
400 Park Ave.
Warminster, PA, 18974
(215) 956-3270
Fax # (215) 956-3240
** Lower Merion is served by DelChester Region

NEW RESIDENTIAL CONSTRUCTION
(All Counties)
400 Park Ave.
Warminster, PA, 18974
(215) 956-3010
Fax # (215) 956-3380

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CUSTOMER NAME

Tax ID # or SSN or Driver’s License No.

**ADDRESS TO BE SERVED

APARTMENT / LOT #

POST OFFICE

ZIP CODE

*UTILITY POLE #

*SUBDIVISION / DEVELOPMENT

TOWNSHIP/MUNICIPALITY/WARD #

** If Applicable

Please use this address when applying for underwriter’s inspection

CUSTOMER’S BILLING ADDRESS

-OR-

PECO ENERGY ACCOUNT #

POST OFFICE

ZIP CODE

TELE. #

SEND REPLY TO:

ELECTRICIAN’S OR BUILDER’S NAME

ADDRESS

Reply Requested by:

POST OFFICE

ZIP CODE

TELE. #

FAX #

CURRENT CONSTRUCTION STATUS:

☐ Not Started - Date Customer Will Start Work: __/__/___ ☐ In Progress ☐ Completed

Approximate Date Service Requested: __/__/___

CUSTOMER COMMENTS


SUBMITTED BY:

DATE:

Enclosures: ☐ Site Plans ☐ Single Line Diagram ☐ Substation Arrangement

TYPE OF REQUEST

☐ New Service ☐ Temporary Service ☐ Upgrade / Changes ☐ Reintroduction of Service

☐ Separation of Wiring ☐ Service Relocation ☐ Demolition (Remove Service) ☐ Make-Safe (De-energize / Cover)

TYPE OF SERVICE: Please include site plan.

RESIDENTIAL

☐ Single House ☐ Mobile Home ☐ Duplex ☐ Town House

☐ Other

COMMERCIAL

☐ Store ☐ Office ☐ Restaurant ☐ Warehouse

☐ Other

Area of Building ___________ Sq. Ft.

SERVICE CHARACTERISTICS:

Underground ☐ Aerial ☐

PHASE VOLTS WIRES AMPS

3  240 3

3  240 4

3  33000 3 or 4

3  120/240 4

3  120/208 4

3  327/480 4

3  13200 3 or 4

3  33000 3 or 4

METER INFO:

☐ Single Meter Required ☐ Multiple Meters Total No.

HEATING/AC CONDITIONING:

☐ Heat Pump _______ Tons ☐ Central Air _______ Tons ☐ Resistance _______ Type Backup _______

☐ Natural Gas ☐ Propane ☐ Other _______

CHARACTERISTICS OF NEW OR ADDITIONAL LOAD:

PECO ENERGY USE ONLY (DEMAND)

LIGHTING

HEATING

AC/COND.

TANKLESS WATER HTR

MISC.

TOTAL

Include single line diagram and substation arrangement if appropriate.

CHARACTERISTICS OF NEW OR ADDITIONAL LOAD:

CONNECTED LOAD (kW)

SUMMER (kW) WINTER (kW)

LARGEST MOTOR SPECIFICATIONS

QUANTITY

SIZE (HP)

LOCKED-ROTOR CURRENT

MOTOR CODE LETTER

PHASE

VOLTAGE

FREQ. OF STARTING (per hr.)

PURPOSE

TOTALIZER LOAD

GENERAL LOAD

KW

KW
### INFORMATION BELOW WILL BE FILLED IN BY PECO:

<table>
<thead>
<tr>
<th>Service Request No.</th>
<th>BUS/MAJ ACCT REP</th>
<th>TELEPHONE</th>
<th>DATE RECEIVED</th>
<th>DESIGNER</th>
<th>TELEPHONE</th>
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</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Service Characteristics – Select One from Each</th>
</tr>
</thead>
</table>

#### Service Type
- Aerial
- Underground
- URD

#### Rate:
- Residential
- Comm (Non-Demand)
- Comm (Demand)
- HT/PD

#### Generation Procurement Class:
- Class 1 (Residential)
- Class 2 (Commercial, less than 100kW)
- Class 3 (Commercial, 100kW to 500kW)
- Class 4 (Commercial, greater than 500kW)

**NOTE:** The customer's initial Procurement Class will be determined by PECO.

<table>
<thead>
<tr>
<th>Pole # / MH # Location</th>
<th>Cut Through Date</th>
</tr>
</thead>
</table>

#### Service Requirements:
- Present Service OK
- Loop Only
- Taps Only
- See Job # __________

#### Metering Location and Requirements:
- Present Location: Meter # __________
- CTs - ______
- PTs - ______
- Indoor
- Outdoor
- On _____ Wall, _____ Ft. From _____ Wall, _____ Ft. Above Ground

#### Advance Notifications:
- Underwriter's Cert. Required
  - Yes
  - No
- Customer to Trench
  - Yes
  - No
- Permit Required
  - Yes
  - No
  - State
  - Other
- ACT 222 Cert. Required
  - Yes # __________
  - No
  - N/A
- PA One Call #
  - Gas
  - BTCO
  - CATV
  - Other

#### Customer Billing:
- Advance Billing Required
  - Yes $ _________
  - No
- Charges: MST
- MCT
- Cust. #
- Date
- BTO #
- Date
- CATV #
- Date
- Other
- Date

#### Sketch / Instructions

![Sample Sketch](image-url)
**INSTRUCTIONS:**
Please complete the front page of this request and return to the PECO Regional Office (listed below) in the area service is required. Incomplete information may result in a delay in processing.

All work must comply with PECO Electric Service Requirements manual and be inspected by an approved inspection agency. (City of Philadelphia requests may be shared with Licenses & Inspections). Not all service voltages are available in all areas. **Before purchasing electrical equipment or proceeding with any wiring**, information regarding service availability and meter location should be obtained from the company.

A credit application and agreement must be completed **if the customer has not had PECO service within the last 60 days**. The company reserves the right to cancel this request if no further communication is received from the customer within 90 days of PECO’s response date.

**NEW BUSINESS SERVICES (1-800-454-4100) http://www.peco.com**

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<td>Fax # (215) 956-3380</td>
</tr>
</tbody>
</table>

**CUSTOMER NAME**:

**ADDRESS TO BE SERVED**: APARTMENT / LOT #

**POST OFFICE**: ZIP CODE

**UTILITY POLE #**: *SUBDIVISION / DEVELOPMENT TOWNSHIP/MUNICIPALITY/WARD #

* **If Applicable**

**CUSTOMER’S BILLING ADDRESS**: PECO ENERGY ACCOUNT #

**POST OFFICE**: ZIP CODE

SEND REPLY TO:

**ELECTRICIAN’S OR BUILDER’S NAME**:

**ADDRESS**:

**POST OFFICE**: ZIP CODE

**TELE. #**: FAX #

**CURRENT CONSTRUCTION STATUS:**

- [ ] Not Started - Date Customer Will Start Work: _____/____/____
- [ ] In Progress
- [ ] Completed

Approximate Date Service Requested: _____/____/____

**CUSTOMER COMMENTS / DESCRIPTION OF WORK:**

**TYPE OF REQUEST**

- [ ] New Service
- [ ] Temporary Service
- [ ] Load Increase / Decrease
- [ ] Upgrade / Changes
- [ ] Separation of Wiring
- [ ] Service Relocation
- [ ] Reintroduction of Service
- [ ] Demolition (Remove Service)
- [ ] Make-Safe (De-energize / Cover)

**TYPE OF SERVICE**: Please include site plan.

- [ ] RESIDENTIAL
- [ ] COMMERCIAL
- [ ] SINGLE HOUSE
- [ ] MOBILE HOME
- [ ] APARTMENT
- [ ] MODULAR HOME
- [ ] DUPLEX
- [ ] TOWN HOUSE
- [ ] OTHER

**SERVICE CHARACTERISTICS**

- [ ] Underground
- [ ] Aerial

**PHASE VOLTS WIRES**

<table>
<thead>
<tr>
<th>PHASE</th>
<th>VOLTS</th>
<th>WIRES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>120</td>
<td>2</td>
</tr>
<tr>
<td>1</td>
<td>120/240</td>
<td>3</td>
</tr>
<tr>
<td>2</td>
<td>120/240</td>
<td>5</td>
</tr>
</tbody>
</table>

**METER INFO**

- [ ] Single Meter Required
- [ ] Multiple Meters Total No __________________

**HEATING / AIR CONDITIONING**

- [ ] Heat Pump ____________ Tons
- [ ] Central Air ____________ Tons
- [ ] Resistance ____________ Tons
- [ ] Other __________________ Type Back-up __________________

**CHARACTERISTICS OF NEW OR ADDITIONAL LOAD**

**PECO ENERGY USE ONLY (DEMAND)**

<table>
<thead>
<tr>
<th>TYPE</th>
<th>CONNECTED LOAD (kW)</th>
</tr>
</thead>
<tbody>
<tr>
<td>LIGHTING</td>
<td>SUMMER (KW)</td>
</tr>
<tr>
<td>HEATING</td>
<td></td>
</tr>
<tr>
<td>AIRCOND.</td>
<td></td>
</tr>
<tr>
<td>TANKLESS WATER HTR</td>
<td></td>
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<tr>
<td>MISC.</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
</tr>
</tbody>
</table>

**Include single line diagram and substation arrangement if appropriate.**

**LARGEST MOTOR SPECIFICATIONS**

<table>
<thead>
<tr>
<th>QUANTITY</th>
<th>SIZE (HP)</th>
<th>LOCKED ROTOR CURRENT</th>
<th>MOTOR CODE LETTER</th>
<th>PHASE</th>
<th>VOLTAGE</th>
<th>FREED OF STARTING (per hr.)</th>
<th>PURPOSE</th>
</tr>
</thead>
</table>

**SUBMITTED BY**: Endorsements

- [ ] Site Plans
- [ ] Single Line Diagram
- [ ] Substation Arrangement

**DATE**: 
### INFORMATION BELOW WILL BE FILLED IN BY PECO:

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<table>
<thead>
<tr>
<th>POL SUB</th>
<th>RATE</th>
<th>RIDER</th>
<th>CONTRACT LIMITS</th>
<th>SIC NUMBER</th>
<th>T NUMBER</th>
<th>DATE REPLY COMPLETED</th>
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<th>AMPS</th>
<th>WIRES</th>
<th>VOLTAGE</th>
<th>PHASE</th>
<th>CIRCUIT</th>
<th>C-QUAD</th>
<th>T-QUAD</th>
<th>LOAD (KVA)</th>
<th>SUMMER</th>
<th>WINTER</th>
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### SERVICE CHARACTERISTICS – Select One from Each

#### SERVICE TYPE
- [ ] Aerial
- [ ] Underground
- [ ] URD

#### RATE:
- [ ] Residential
- [ ] Comm (Non-Demand)
- [ ] Comm (Demand)
- [ ] HT/PD

#### GENERATION PROCUREMENT CLASS:
- [ ] Class 1 (Residential)
- [ ] Class 2 (Commercial, less than 100kW)
- [ ] Class 3 (Commercial, 100kW to 500kW)
- [ ] Class 4 (Commercial, greater than 500kW)

**NOTE:** The customer’s initial Procurement Class will be determined by PECO, based on peak load estimates for the first year of service. The customer’s Procurement Class will be adjusted each year, based on actual usage.

#### METER TYPE:
- [ ] KWH
- [ ] IND. DEMAND
- [ ] RECORDER
- [ ] TOU

#### SERVICE PHASING:
- [ ] SINGLE PHASE
- [ ] TWO PHASE
- [ ] THREE PHASE

#### SERVICE REQUIREMENTS:
- [ ] Present Service OK
- [ ] Loop Only
- [ ] Taps Only
- [ ] See Job # __________

#### METERING LOCATION AND REQUIREMENTS:
- [ ] Present Location: Meter # __________
- [ ] CTs - _______
- [ ] PTs - _______
- [ ] Indoor
- [ ] Outdoor
- [ ] On _____ Wall, _____ Ft. From _____ Wall, _____ Ft. Above Ground

#### ADVANCE NOTIFICATIONS:
- [ ] Underwriter’s Cert. Required
- [ ] Customer to Trench
- [ ] Permit Required
- [ ] ACT 222 Cert. Required
- [ ] PA One Call # __________

**CUSTOMER BILLING:**
- [ ] Advance Billing Required
- [ ] Yes $ _______
- [ ] Yes # _______
- [ ] No
- [ ] N/A
- [ ] Yes
- [ ] No
- [ ] State
- [ ] Other

**Gas**
- [ ] Yes
- [ ] No
- [ ] Yes
- [ ] No
- [ ] No
- [ ] N/A
- [ ] Yes
- [ ] No
- [ ] State
- [ ] Other

**BTCO #**
- [ ] Yes
- [ ] No
- [ ] Yes
- [ ] No
- [ ] State
- [ ] Other

**CATV #**
- [ ] Yes
- [ ] No
- [ ] Yes
- [ ] No
- [ ] State
- [ ] Other

**Other**
- [ ] Yes
- [ ] No
- [ ] Yes
- [ ] No
- [ ] State
- [ ] Other

**SKETCH / INSTRUCTIONS**