

# NEW SUBDIVISION ELECTRICAL SERVICE INQUIRY FORM



## BEFORE YOU BEGIN

The purpose of this form is to gather enough information to better understand your request. The following sections contain information necessary for our team to make accurate and informed decisions. It is important to fill out all fields to the best of your ability. Questions about the form may be asked via email or by phone at 307-245-3261. For assistance with filling the form out with the proper information, please contact a qualified electrician or electrical engineer.

**Submit this form and other materials by emailing [billing@highwest.coop](mailto:billing@highwest.coop)**

## PRIMARY CONTACT FOR CONSTRUCTION PROJECT

|                      |                                             |
|----------------------|---------------------------------------------|
| Contact Name: _____  | Relationship to Project:                    |
| Business Name: _____ | <input type="checkbox"/> Builder/Contractor |
| Email Address: _____ | <input type="checkbox"/> Developer          |
| Phone Number: _____  | <input type="checkbox"/> Property Owner     |
|                      | <input type="checkbox"/> Other: _____       |

## ELECTRICIAN CONTACT INFORMATION

|             |                     |
|-------------|---------------------|
| Name: _____ | Phone Number: _____ |
|-------------|---------------------|

## SERVICE LOCATION

|                         |                    |
|-------------------------|--------------------|
| Address: _____          | City, State: _____ |
| Latitude: _____         | Longitude: _____   |
| Major Crossroads: _____ |                    |
| Parcel Number: _____    | County: _____      |

## BILLING INFORMATION

If current HWE member, please provide Member Number: \_\_\_\_\_

Legal Name: \_\_\_\_\_

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*Zip Code*

Email Address: \_\_\_\_\_

☐ Check this box if you want to add additional  
authorized contacts for this account

Phone Number: \_\_\_\_\_

## SERVICE REQUEST CHARACTERISTICS

Service Voltage: ☐ 120/240V (1ph.) ☐ 120/208V (3ph.) ☐ 277/480V (3ph., Commercial Only)

Total Number of Lots/Units: \_\_\_\_\_

Typical Size of Main: \_\_\_\_\_ Amps

Number of Single Family Homes: \_\_\_\_\_ Square Footage(s): \_\_\_\_\_

Number of Multi-Family Units: \_\_\_\_\_ Square Footage(s): \_\_\_\_\_

Number of Other Home Styles: \_\_\_\_\_ Square Footage(s): \_\_\_\_\_

Description: \_\_\_\_\_

Number and Level of EV Chargers (if applicable): ☐ Level I \_\_\_\_\_ ☐ Level II \_\_\_\_\_

Will gas be installed in this subdivision? ☐ Yes ☐ No

Will the houses be EV ready? ☐ Yes ☐ No

Will there be commercial, industrial, school(s), irrigation pump stations, etc. in this subdivision? Please describe:

Estimated date the site will be ready for electric installation: \_\_\_\_\_

## PLEASE SUBMIT THE FOLLOWING IN ADDITION TO THIS FORM:

- |                                                            |                                       |                                                             |
|------------------------------------------------------------|---------------------------------------|-------------------------------------------------------------|
| <input type="checkbox"/> Site Map                          | <input type="checkbox"/> Phasing Plan | <input type="checkbox"/> Final Plat (AutoCAD Drawing & PDF) |
| <input type="checkbox"/> Additional Details (as necessary) | <input type="checkbox"/> SHP File     |                                                             |

## ADDITIONAL INFORMATION THAT MAY ASSIST WITH SERVICE PLANNING:

*After completing this form, save the PDF and email it to **[billing@highwest.coop](mailto:billing@highwest.coop)***