



LOAD SHEET - RESIDENTIAL

APPLICANT INFORMATION	PROJECT INFORMATION
Name _____ Tax Map Parcel _____ Phone _____ E-mail _____ Service (911) Address _____ Community _____ Lot Number _____	Nearest Intersection _____ Nearest DEC Equipment No. _____ Date of Application _____ DEC WO No. _____ Date Service Required _____
Please check the box indicating that the Member acknowledges it is their responsibility for marking out all private utilities (irrigation, well water pipe, septic, etc) on property prior to construction. <input style="float:right;" type="checkbox"/>	
TYPE OF CONSTRUCTION	SIZE OF HOUSE - SQUARE FEET
Single Family <input type="checkbox"/> Duplex <input type="checkbox"/> Multi-Family <input type="checkbox"/> Modular <input type="checkbox"/> Mobile Home - Double Wide <input type="checkbox"/> Mobile Home - Single Wide <input type="checkbox"/>	Less than 1000 Sq Ft <input type="checkbox"/> 1001 - 2000 Sq Ft <input type="checkbox"/> 2001 - 3000 Sq Ft <input type="checkbox"/> 3001- 4000 Sq Ft <input type="checkbox"/> Larger than 4000 Sq Ft <input type="checkbox"/> Specify size _____ Will solar be installed on the house? Yes <input type="checkbox"/> No <input type="checkbox"/>
HVAC	CUSTOMER SERVICE PANEL
What will the primary heat source be: Heat Pump _____ Ton Resistance Heat _____ kW Geothermal _____ HP Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Other (Please specify) _____ Will there be Air Conditioning? _____ Ton	100 Amp <input type="checkbox"/> 320 Amp <input type="checkbox"/> 200 Amp <input type="checkbox"/> Larger than 320 Amp - Please call DEC
WATER HEATER	
Electric <input type="checkbox"/> Gas <input type="checkbox"/> Tankless <input type="checkbox"/>	
MISCELLANEOUS EQUIPMENT	
EV Chargers? Yes <input type="checkbox"/> kW _____ Motor (larger than 10HP)? Yes <input type="checkbox"/> HP _____	
* For any underground service 320A and below, DEC will furnish and install the service conductors and, if necessary, conduit from the transformer to the meter pan. Privately installed wire/conduit will not be accepted. Please contact DEC in regards to secondary wire for CT metered services. ** The center of the meter pan shall be installed between 4'-0" and 5'-6" above finished grade	
SEPTIC (For properties without sewer)	
Do you have an approved septic plot plan? <input type="checkbox"/> Yes <input type="checkbox"/> No Please note: approved septic plot plan must be submitted before design begins.	
VOLTAGE REQUESTED (Please check a box)	
240/120V 1ø <input type="checkbox"/> 208/120V 3ø (Apartment/Multi-family) <input type="checkbox"/>	
ADDITIONAL INFORMATION (Is there anything you would like to add - for example, swimming pool, pool house, etc.)	

Date _____
Signature _____
Company Name _____

Note: Incomplete and/or unsigned forms will not be processed and will be returned resulting in a delay. The Member is responsible to provide sufficient load data for DEC to size equipment. If the equipment is undersized due to insufficient data, the Member will be charged for equipment replacement.

Questions about your application? Please contact [New Service Department tel. 302.349.9090 extension 258](mailto:nservice@delaware.coop)
Technical questions? Please contact [Paul Greenlee tel. 302.349.3106 email.pggreenlee @delaware.coop](mailto:Paul.Greenlee@delaware.coop) or [Ryan Shockley tel. 302.349.0723 email.rshockley @delaware.coop](mailto:Ryan.Shockley@delaware.coop)