

APPLICATION FOR COMMERCIAL and INDUSTRIAL ZONING/BUILDING CERTIFICATE



The undersigned hereby makes application to the Village of New Bremen, Ohio to supply all electric and/or water/sanitary service at the address stated herein until notified to discontinue such service. Applicant agrees to install, use and pay for such service in accordance with the applicable rate schedule, and rules and regulations of the Village of New Bremen. Completed application and 2 sets of site and building design plans are required with submission.

Own Rent Account# _____
(To Be Assigned by the Village of New Bremen)

Applicant(s)/Business Name _____

Service Address _____

Mailing Address (if different from above) _____

Business Phone _____ Email _____

Sq. ft of bldg _____ Height of building _____ Zoning/Parcel ID _____

Setbacks: Front _____ L Side _____ R Side _____ Lot Width _____ Lot Depth _____

Written Name of Applicant _____ Total Est. Cost \$ _____

Signature of Applicant _____ Date _____

Electric Service Request:

New or Existing Facility: *New* *Existing*

Requested Single-Phase Voltage 120/240 *Electric Service:* _____amps

Requested Three-Phase Voltage: 120/208 277/480 12.47/7.2kV

Connected Load: _____amps *Service Entrance Rating:* _____amps

Note: The Village of New Bremen may require the customer to provide additional information including, but not limited to, single line diagrams, site plans and load calculations. The Village reserves the right to request additional information regarding the electric service and load requirements beyond those items listed. The Village reserves the right to select the customer service location.

The Village shall be responsible for the transformer sizing, installation and service location selection for 120/208V and 277/480V services.

For 12.47/7.2kV services, the Village shall be responsible for the metering and service location selection. All equipment beyond the meter shall be the responsibility of the party requesting service. The Village reserves the right to request a monetary aid to construction for required service extensions based on a review by the Village of the extension requirements.

If this is a new facility, please fill out the additional information:

Contractor Name _____

Contact Name _____

Email _____

Business Phone _____ Cell Phone _____

Please check here if a temporary electric service will be required for construction _____

Water Tap Request: *Meter Size* _____ *Sanitary Sewer Tap Request: Tap Size* _____

Service Start Date _____ Est. Completion Date _____