



**Town of Front Royal  
Commercial Load Data Form**

Customer Information			
Customer Name		Mailing Address	
Customer Contact		Mailing Address	
Customer Phone #		Mobile #	
Customer Fax #		Customer E-mail	
Contractor/Contract		Mailing Address	
Contractor E-mail		Contractor Phone #	
Service Location / Facility Information			
Each service address requires a separate Commercial Load Data Form			
Street Address		Development/Lot #	
Number of Bldgs		# Metered Units/Bldg	
Total Sq Ft Per Unit		Conditioned Sq Ft	
Type of Heat		Business Office Hours	
Hours of Operation		Days per week	
Type of Service(s) Requested			
<b>Service Type (Check all that apply)</b>			
<input type="checkbox"/> New Permanent Service <input type="checkbox"/> OH <input type="checkbox"/> UG <input type="checkbox"/> Upgraded / Relocated Service <input type="checkbox"/> OH <input type="checkbox"/> UG <input type="checkbox"/> New Temp Service <input type="checkbox"/> OH <input type="checkbox"/> UG			
Electric Service Size			
The Town of Front Royal Energy Services Department shall determine and/or approve the location of all metering. Contact the Energy Services Department at (540) 635-3027 for further information			
<b>Service Size (Check only one)</b>			
<input type="checkbox"/> 100 Amp <input type="checkbox"/> 200 Amp <input type="checkbox"/> 400 Amp <input type="checkbox"/> 600 Amp <input type="checkbox"/> Other: _____ Amp			
<b>Voltage (Check only one)</b>			
<input type="checkbox"/> 1 Phase / 3 Wire 120/240 <input type="checkbox"/> 3 Phase / 4 Wire 120/208 <input type="checkbox"/> 3 Phase / 4 Wire 277/480 <input type="checkbox"/> Primary / High Voltage: _____			
<b>Service Characteristics</b>			
Size of Service Wire: Wire Type: <input type="checkbox"/> AL <input type="checkbox"/> CU			
Number of Wires per Phase: _____			

