



Dear Customer/Builder:

Effective March 23, 2009, Xcel Energy's Builders Call Line (BCL) Department will become your first point of contact for new gas and/or electric service requests for all areas previously provided by our Greeley area office.

Xcel Energy uses a standard application form for residential services.

- For an individual home service request, please use this application form filled out as completely as possible and accompanied by a plot plan.
- **For subdivisions, if you are a builder within a subdivision with multiple houses with the same loads and billing information, please provide the front page of the application filled out completely excluding the house address but to include the city, state, zip code and if the area is unincorporated or incorporated. Use this application as a cover sheet followed by your addressed plot plans requesting gas/electric service. Please include the subdivision name on the application and mark the service location(s) on the plot plan.**

With the high volume of requests we receive we will be better able to match the application to the plot plan and have the detailed information necessary for installation, billing and contact information. Fax your completed paper work for a service request to 1-800-628-2521. **Please note that this procedure is effective March 23, 2009.**

Please be assured this will help expedite the process and will ensure that we have more accurate information to meet your specific needs.

If you have any questions or concerns about this process, please call and speak to a BCL representative at 1-800-628-2121.

We greatly appreciate your help with this process for submitting applications.

Sincerely,

Debra Douglas  
Xcel Energy  
Builders Call Line Department Supervisor



# APPLICATION FOR GAS AND ELECTRIC SERVICES


Please photocopy both sides of this page for multiple use.

Date _____	xcelenergy.com	Phone: 1-800-628-2121	Fax: 1-800-628-2521
<b>SERVICE ADDRESS (PLEASE PRINT)</b>			
House or Fire Number _____		Full Street Name _____	
City _____		State _____ Zip _____	
Urban _____	Rural _____	Direction to service location (Rural required) _____	
Subdivision Name _____		County _____	
Lot Number _____		Township _____	
Block Number _____		Range _____	
County _____		Section _____	
<input type="checkbox"/> Unincorporated <input type="checkbox"/> Incorporated		Cross Street/Road _____	
<b>CONSTRUCTION INFORMATION (PLEASE PRINT)</b>			
Owner Information (Party to be billed during construction)		Contractor Information (include phone number)	
<b>Owner/Builder Name</b> _____		<b>Builder</b> _____	
Mailing Address _____		Phone Number (_____) _____	
City _____ State _____ Zip _____		E-mail _____	
Phone Number (_____) _____		<b>Heating Contractor</b> _____	
Contact during construction _____		Phone Number (_____) _____	
Address _____		E-mail _____	
City _____ State _____ Zip _____		<b>Electrical Contractor</b> _____	
E-mail _____		Phone Number (_____) _____	
Daytime phone (_____) _____		E-mail _____	
Fax (_____) _____		<b>A &amp; E Firm</b> _____	
Cell (_____) _____		Phone Number (_____) _____	
		E-mail _____	
Required services: <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> New <input type="checkbox"/> Relocate <input type="checkbox"/> Conversion <input type="checkbox"/> Demolition			
<b>SERVICE INFORMATION (COMPLETE ALL SECTIONS)</b>			
<b>Electric Service</b>		<b>Gas Service</b> (For gas service, please fill out second page of application.)	
<input type="checkbox"/> overhead <input type="checkbox"/> underground Service size (amps) _____		Is this service being used for primary heat? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Air conditioning tonnage: _____ ton		<b>Total gas load (BTUs/hour):</b> _____	
<input type="checkbox"/> single phase <input type="checkbox"/> three phase    Voltage _____		Pressure <input type="checkbox"/> 6 or 7 inch <input type="checkbox"/> 2 lb	
<b>Is temporary electric service needed?</b> <input type="checkbox"/> Yes		<input type="checkbox"/> Other _____	
<input type="checkbox"/> single phase <input type="checkbox"/> three phase <input type="checkbox"/> at pole		Date needed _____ / _____ /20 _____	
<input type="checkbox"/> at transformer <input type="checkbox"/> pedestal <input type="checkbox"/> other _____		Foundation backfill /To grade _____ / _____ /20 _____	
Date needed _____ / _____ /20 _____			
Foundation backfill /To grade _____ / _____ /20 _____			
<b>FACILITY INFORMATION (COMPLETE ALL SECTIONS)</b>			
<b>Building Type</b> <input type="checkbox"/> single home <input type="checkbox"/> duplex <input type="checkbox"/> multi-dwelling/no. of units _____ <input type="checkbox"/> commercial bldg. <input type="checkbox"/> mobile			
<b>Building Class</b> <input type="checkbox"/> residential <input type="checkbox"/> commercial <input type="checkbox"/> farm			
Building square footage _____    Building setback from property line (feet) _____			
<b>Electric Meter</b> location preference (when you are facing the front of the house from the outside) <input type="checkbox"/> on house <input type="checkbox"/> on garage			
<input type="checkbox"/> right side <input type="checkbox"/> left side <input type="checkbox"/> front <input type="checkbox"/> other _____    Feet from front corner _____			
<b>Gas Meter</b> location preference (when you are facing the front of the house from the outside) <input type="checkbox"/> on house <input type="checkbox"/> on garage			
<input type="checkbox"/> right side <input type="checkbox"/> left side <input type="checkbox"/> front <input type="checkbox"/> other _____    Feet from front corner _____			
<i>For Commercial</i>			
Total motor load _____ HP    Largest HP _____    Code _____    BTU input _____    See second page of form			

END USES			
	Gas (specify BTUs/hour input)	Electric (specify kW)	Other Fuel Type
Heating			
Water Heating			
Cooking			
Air Conditioning			
Clothes Drying			
Fireplace			
Lighting (Commercial Only)			

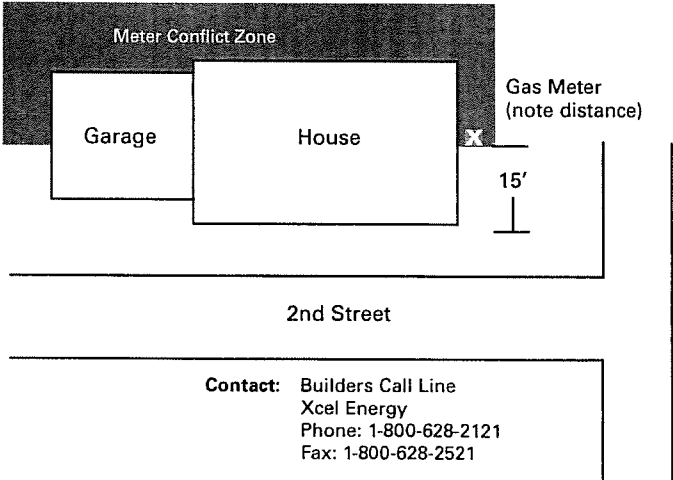
**Heat Source (check type)**    forced air furnace    heat storage    underfloor/slab heat    baseload  
**Meter Option (if applicable)**    Time of Use    Dual Fuel    Limited Off-Peak    Saver's Switch

It is preferred that the site plan including proposed meter locations and compass directions be attached. Or draw sketch below as if you are facing the front of the house from the outside.



Service Address \_\_\_\_\_

Please indicate north



**Contact:** Builders Call Line  
 Xcel Energy  
 Phone: 1-800-628-2121  
 Fax: 1-800-628-2521



1. Customer owned facilities must be located and identified by customer.
  2. Indicate distances for meters from nearest corner of building.
  3. Preferred meter location is on same side of house as Xcel Energy source.
  4. Inspection must be complete before service is energized.
  5. If no Inspector, Proof of Compliance (Electric) and/or Certificate of Compliance (Gas) must be complete.
  6. Site must be within 4 to 6 inches of final grade (for new construction) and a clear 10-foot-wide path from Xcel Energy source to meter.
  7. Winter construction charges may apply from 10/1 to 4/15.
  8. Water and sewer must be installed prior to electric or gas service.
- Meter Conflict Zone* any potential area for a deck, patio, pool, etc.