Borough of Hatfield
PO Box 190, South Main and Chestnut Streets
Hatfield, PA 19440
Application for Electric Service (Please Print)

Applicant
Date:_____
Name:_____

Prospective Address:_____
Customer:_____
Number of persons living in household:_____

Post Office:_____
Address of property to be served:_____

Telephone:_____

Electrical Contractor:_____
Post Office:_____
Mail bills to:_____

Telephone:_____
Address:_____

Address:_____
Post Office:_____

Customer's Present Address:_____
Post Office:_____

Post Office:_____

Approximate Date Construction to start_____
Telephone:_____
Approximate Date Service Required_____
No. of Meters:_____

Type of Service

_____Permanent _____Residential
_____Commercial _____Industrial

_____Temporary _____New
_____Additional _____Changes

_____Aerial _____Amps
_____Volt _____Phase

_____Wire _____Underground

Electric Range:
(Yes
(No
Resistance Heat:
(Yes

Electric Water Heater:
(Yes
(No
Heat Pump:
(Yes

Air Conditioner:
(Yes
(No

(No (No

Connected Load
Lighting:_____KW Appliances:_____KW Water Heater_____KW
Electric Heat:_____KW

Largest Size Motor:_____HP Other Loads:_____KW Total:_____KW

Remarks:_____
_____

Temporary Service Fee of (15.00) paid on:_____
I CERTIFY THAT THE INFORMATION ON THE ABOVE APPLICATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.
Signed:_____