



**A Customer Owned Utility**  
*Serving Our Community Since 1894*



## **INSTRUCTIONS ABOUT THE “SERVICE REQUEST FORM” (SRF)**

1. The SRF is an application to NAED requesting NAED to allow the applicant to install a new electrical service or alter the existing electrical service to any residential, commercial, industrial or municipal property in the Town of North Attleborough.
2. Incomplete or inaccurate forms will be returned to the applicant. NAED will not begin review of the SRF until such time that the document is complete with the association information, i.e. load calculations, signatures, etc.
3. Applicants are advised that no SRF will be considered approved, until and unless all appropriate NAED signature(s) of approval are placed on the SRF.
4. NAED will not provide an “SRF Number” on the form until all NAED signature(s) of approval are placed on the SRF.
5. NAED will not issue a work order or unlock any meter until a town electrical permit # has been provided. (Emergencies Excluded).
6. NAED’s ability to review and assess the application in an expeditious manner is predicated upon the information, accuracy and completeness of the application.
7. NAED reserves the right to request such additional information as it believes to be appropriate and necessary to review and assess the application.
8. NAED’s approval assumes, and requires, that the work to be performed will be done in a manner that is compliant and consistent with the information presented in the SRF and NAED’s “Terms & Conditions”, “Construction Requirements for New Developments”, “Information and Requirements for Electric Service”, M.G.L.c. 164, relevant safety codes and NAED operation policies, procedures and practices. NAED reserves the right to amend the SRF at its discretion.
9. No work is to be done on NAED equipment, meters or property without the prior written approval of NAED.
10. Any questions regarding these directions, the review process or the status of an application should be directed to the Office of the General Manager.
11. The SRF is valid for six months from issue date.



# SERVICE REQUEST FORM

**NORTH ATTLEBOROUGH ELECTRIC DEPARTMENT**  
 275 Landry Avenue  
 North Attleboro, Massachusetts 02760  
 Phone: (508) 643-6300

SRF #: \_\_\_\_\_  
 PERMIT #: \_\_\_\_\_  
 DATE: \_\_\_\_\_  
 Valid for 6 Months from Issue Date

## CUSTOMER INFORMATION / SERVICE LOCATION

Name:	Account Number:
Address:	Phone Number:
	Cell Phone Number:
	Email Address:

## GENERAL CONTRACTOR INFORMATION

Name:	Phone Number:
Address:	Cell Phone Number:
	Email Address:
	Contractor License Number:

## ELECTRICIAN INFORMATION

Name:	Phone Number:
Address:	Cell Phone Number:
	Email Address:
	Electrician License Number:

### Class of Service

### Type of Service Request

<input type="checkbox"/> Single Family Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Multi Family Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Municipal <input type="checkbox"/> Other	<input type="checkbox"/> New Service <input type="checkbox"/> Temporary Service <input type="checkbox"/> Change Existing Service <input type="checkbox"/> Siding/Meter Unlock <input type="checkbox"/> Solar/Net Meter Application <input type="checkbox"/> Other: _____
Plan: <input type="checkbox"/> Attached <input type="checkbox"/> To Follow <input type="checkbox"/> Not Needed	Construction: <input type="checkbox"/> Overhead <input type="checkbox"/> Underground
Heating: <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Other <input type="checkbox"/> None	Hot Water: <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Other <input type="checkbox"/> None
Voltage	Description of Work
<input type="checkbox"/> 120 Volts Single Phase <input type="checkbox"/> 120/240 Volts Single Phase <input type="checkbox"/> 120/208Y Volts Three Phase <input type="checkbox"/> 277/480Y Volts Three Phase <input type="checkbox"/> 120/208 Single Phase Network	# of Meters Present _____ # of Meters Proposed: _____
Service Size : _____ amps	<input type="checkbox"/> Check if Meter is for Common Areas

### Electrician's Sketch / Notes

### NAED Sketch / Notes

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**Electrical Requirements:** A detailed load calculation must be provided with all Service Requests with the exception of siding or residential service 200A and below.

**Acknowledgement:** Customer shall be solely responsible for any and all work performed by, or on behalf, of the customer, pursuant to this SRF, and NAED shall have no liability therefore.

Signature of Electrician or Authorized Representative: \_\_\_\_\_ Date: \_\_\_\_\_

( This area is for NAED use, do not write below this section. )

SERVICE INFORMATION	DISTRIBUTION	INITIALS / DATE
Pole, MH, HH #: _____ Xfmr #/kVA: _____/_____	<input type="checkbox"/> Meter Division	
Number of Customers on Xfmr: _____	<input type="checkbox"/> Engineering	
Service Size: _____ Amps    Meter Type: _____	<input type="checkbox"/> Operations (>400 A)	
Billing Multiplier: _____	<input type="checkbox"/> General Manager (>400 A)	

