



CHELAN COUNTY
www.chelanpud.org

TEMPORARY CONSTRUCTION SERVICE APPLICATION

Temporary construction service limited to 12 months
for projects following Chelan PUD [Regulation 43](#)

For Contractor Use Only

CUSTOMER BILLING INFORMATION

Business/Company name: _____ dba: _____

Current business billing address: _____

City: _____ State: _____ Zip Code: _____

Dept. of Revenue UBI#: _____ EIN (Tax ID): _____

Business Billing Contact (Employee): _____ Email Address: _____

Business phone: _____ Secondary Business phone: _____ Cell

Have you had service with Chelan PUD within the last 3 years? NO YES - List Account # if available: _____

Chelan PUD may contact you to obtain Guarantee of Payment documentation, a deposit, or additional billing information.

SERVICE INFORMATION

Service address: _____ City: _____

Assessor Parcel /Geographic ID (12 digit) #: _____

Legal Property Owner: _____ Phone: _____

Provide a brief description of your project: _____

TYPE IS (check all that apply):

Residential Industrial Commercial

Multi-Unit Complex

Other _____

Note: Some loads may require you to provide load profile data information and a one-line diagram.

VOLTAGE DESIRED:

Single-phase 120/240 volts, 3 wire

Three-phase 120/208 volts, 4 wire

277/480 volts, 4 wire

SIZE OF METER BASE:

100 Amps 200 Amps Other _____

L&I Permit # (if available) _____

Temporary construction service must receive electrical approval from the Washington State Department of Labor and Industries.

For Office Use Only:

Acct # _____

SR# _____

Date Received: _____

LE# _____

Initials: _____

November 2022

