



Rancho Cucamonga
Municipal Utility

CITY OF RANCHO CUCAMONGA APPLICATION FOR ELECTRIC SERVICE

Please submit a completed application for electric service to:
 Rancho Cucamonga Municipal Utility
 Mail address: PO BOX 4499, Rancho Cucamonga, CA 91729-4499
 In-Person address: 10500 Civic Center Drive, Rancho Cucamonga, CA 91730
 Email: RCMU.Customer@CityofRC.us | Phone: (909) 919-2612 | Fax: (909) 477-2741

APPLICATION INSTRUCTIONS

TYPE OF SERVICE <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> NAME TRANSFER <small>(EXISTING LOCATION)</small>	Please fill out the application completely and accurately. Applications without sufficient information will be rejected. <ul style="list-style-type: none"> ◆ A deposit will be required prior to service being established. ◆ Electrical drawings are required for all new construction or existing structures requiring electrical rewiring.
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ACCOUNT INFORMATION

Business Name:	
DBA Name (Doing Business As):	Tax I.D.: —

SERVICE ADDRESS INFORMATION

Service Address:	
Business Telephone #:	Type of Business:
In Service Date: _____ <small>Note: Please DO NOT list a Friday, Saturday, Sunday or holiday date. Please allow 2 working days from the day of submittal (excluding Friday, Saturday, Sunday and holidays). Orders requested for Friday, Saturday, Sunday or holiday dates will be scheduled for our next available business day.</small>	

BUSINESS INFORMATION (please fill out the area that best represents the new account)

Sole Proprietorship	Proprietor Name:		
	Social Security #:	Driver's License #:	State:
	Home Address:		
	City:	State:	Zip:
	Primary Contact #: ()	Secondary Contact #: ()	
Business Partnership	Partner 1 Name:		Partner 2 Name:
	Social Security #:		Social Security #:
	Driver's License #:	State:	Driver's License #:
	Email Address:		Email Address:
	Primary Contact #: ()		Primary Contact #: ()
Corporations	Corporate Officer 1 Name:		Corporate Officer 2 Name:
	Email Address:		Email Address:
	Primary Contact #: ()		Primary Contact #: ()

MAILING ADDRESS INFORMATION

C/O; Attention:		
Address:		
City:	State:	Zip:

TEXT MESSAGE NOTIFICATION

RCMU will attempt to contact you for emergency notifications, planned power outages and potential interruption of service due to non-payment utilizing the information provided below. Message and data rates may apply.	
Cell Phone #: ()	Email Address:

REQUESTED SERVICE LEVEL INFORMATION

Operating Hours:

_____ hours per day

_____ days per week

_____ months per year

Typical daily operating hours (specify):

_____ am

to

_____ pm

Indicate:

_____ Permanent Service

_____ Temporary Service

_____ Service Upgrade

_____ Other:

Indicate Service Voltage:

_____ 120/240 VoHs 1-Phase 3W

_____ 120/208 VoHs 3-Phase 4W

_____ 277/480 VoHs 3-Phase 4W

Main Switch Size(s) (amps):

METER ACCESS INFORMATION

Locked Gate: _____ Yes* _____ No

Security Alarms: _____ Yes* _____ No

Meter Room: _____ Yes* _____ No

* If locked gates, security alarm or meter room restricts access to meter, you must provide either a key or code that will allow access for employees of the utility to read the meter and respond to calls for service. The key or code must be furnished no later than at the time of meter installation.

ADDITIONAL AUTHORIZED ACCOUNT USER(S) (Optional)

List any authorized personnel allowed to make changes on the account. Attach additional names on separate sheet.

Name:

Title:

Telephone #:

Name:

Title:

Telephone #:

RULES & PROCEDURES FOR APPLICATION PROCESSING

As applicant, I request that the City of Rancho Cucamonga (the "City") prepare the design and determine the customer service charges for providing electric service to the above addressed project. I understand that service will be provided in accordance with the City Rules and Rate Schedules and the following conditions:

1. Customer provided service facilities shall be furnished, installed and inspected in accordance with design drawings prepared and approved by the City. Customer facilities not installed, inspected and approved in accordance with the approved City drawing will not be accepted.
2. Copies of approved City design drawings and the amount of the service charges to be paid will be mailed to the applicant at the address furnished on this application. However, in any event, it shall be the responsibility of the applicant to obtain the approved drawings and pay the service charges.
3. Applicant shall pay all service charges and required deposits prior to scheduled installation of City furnished facilities.

The design, size, number, type and location of service facilities to be furnished and installed is dependent upon the approved Plan submitted by the applicant. The applicant shall notify the City in writing of any changes, deletions, omissions, additions or revisions to the plan or information submitted that would affect the final design or service charges. Changes made after submittal of this application may result in additional charges.

	By initialing here, the applicant acknowledges it is their sole responsibility to contact the City by phone, email or fax with <u>any</u> account updates including but not limited to ownership, mailing address or contact information changes.
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Initials

If you have any questions regarding these matters or require further information, please contact RCMU Customer Service at:
 Phone 909.919.2612 | Fax 909.477.2741 | Email RCMU.Customer@CityofRC.us

Signature of Applicant

Date

Signature of City Representative

Date