



Electric Load Analysis for Residential

*Inspection Services
Georgetown, Texas*

Date: _____

General Information

Project Street Address: _____
Project Street Address: _____

Property Owner: _____
Owner Address: _____
City, State, Zip Code: _____
Phone Number: _____ Mobile: _____ Fax: _____
E-mail Address: _____

Agent: _____
Agent Address: _____
City, State, Zip Code: _____
Phone Number: _____ Mobile: _____ Fax: _____
E-mail Address: _____

Construction Site Contact Name: _____
Construction Site Phone Number: _____

Required Information and Submittals

Site Plan and Electrical One Line (AutoCAD format) _____
(Plans including all Easements and Existing Utilities)
Electrical Load Analysis (see attached sheet 2 of 2) _____
Requested Point of Service & City Transformer Location _____
(Approval by City's Electric Department)
Type of Service Overhead or Underground _____
Schedule of Buildings _____
Number of Units in each Building _____
Electric or Gas Heat _____
Requested Date of Temporary Service _____
Construction Start Date _____

Billing Information

Name and Company: _____
Billing Address: _____
City, State, Zip Code: _____

Note: All information must be provided to the City before City's Electrical design proceeds.

REQUIRED WITH PERMIT



Electric Load Analysis for Residential

**Inspection Services
Georgetown, Texas**

Electric Load Analysis

Main Disconnect Size: _____ Amps _____ Volts _____ Phase

Lighting Load:	_____ kW		kW x 1.25 = _____
Receptacle Load:	_____ kW	First 10 kW at 100% remainder over 10 kW at 50% =	_____
Equipment Load:			
1. A/C	_____ kW	largest load of heating or cooling =	_____
2. Heat	_____ kW		
3. Water Heater(s)			= _____
4. Range Oven			= _____
5. Laundry			= _____
6. Dishwasher			= _____
7. Small Appliance			= _____
8. Swimming Pool/Spa			= _____
9. Miscellaneous			= _____
Kitchen Load:	_____ kW	x _____ % Demand Factor (NEC 220-20)	= _____
Largest Motor Load:	_____ HP		kW at 125% = _____
	<small>(Motor's 75 hp and larger will require assisted start)</small>		

Total Connected Load: _____ =

Total Connected Load: _____ kW
 Future Load: _____ kW + Total Connected Load _____ kW
 Total Amp Load of : _____ Amps at _____ Volt _____ Phase, _____ Wire

This section pertains to the installation of EV Charging Stations (please attach cut sheets/specification drawings)
 *Customers must have prior approval from the City of Georgetown before installing EV charging stations

Do you plan on installing EV Charging Stations/Infrastructure? (Yes)/(No)

Total Connected EV Load: _____ Future EV Load: _____

REMARKS:

Application Completed By: _____ Date: _____
Signature Print Name MM-DD-YY

City Representative: _____ Date: _____ Phone # _____
Name Received

Note: All information must be provided to the City before City's Electrical design proceeds.

REQUIRED WITH PERMIT