



# ELECTRIC UTILITY SERVICE CONNECTION AUTHORIZATION

2828 Allouez Avenue Bellevue, WI 54311 (920)468-5225

Property Address/Location: \_\_\_\_\_

Municipality: Bellevue, WI

### Electrical Service Installer Information:

Contractor Name \_\_\_\_\_ Phone \_\_\_\_\_

Contractor Address \_\_\_\_\_

Email \_\_\_\_\_

Contractor Credential ID # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Electrician Name \_\_\_\_\_ License # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Installer/Responsible Party Statement: I hereby certify that all wiring and electrical system components installed at this address have been installed in accordance with all applicable Local, State, and Federal Codes/Requirements, the National Electrical Code, equipment manufacturer's requirements and recommendations, Public Utility Service Rules and section 101.865 of Wisconsin State Statutes. Energizing this electrical service/wiring, and all associated components will in no way create a hazard.

Signature of Installing Electrician/Qualified Individual \_\_\_\_\_ Date \_\_\_\_\_

\*Upon Completion of service installation, deliver this form to Village of Bellevue Offices 2828 Allouez Ave., Bellevue, WI 54311; email rstrege@villageofbellevue.org, at least 24 hours before system energizing is desired.

### Electrical Service Information:

Service Classification:  Residential  Commercial/Industrial  Agricultural  
\_\_\_\_\_ Voltage \_\_\_\_\_ Amperage \_\_\_\_\_ Phase

Service Characteristics:  Permanent  Temporary  
 Overhead  Underground  
 New Service  Service Upgrade  
 Interrupting Capacity as provided by Public Service \_\_\_\_\_

### Inspector Information:

Inspector Statement: I have inspected the electrical service installed at this address and have found that the system substantially complies with National Electrical Code Requirements and the State of Wisconsin Electrical Code.

Inspector Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Inspector Name \_\_\_\_\_

### WPS Action Taken:

System safely energized on \_\_\_\_\_ by \_\_\_\_\_  
(Date) (WPS Representative Energizing System)

\*WPS to email this form to; with WPS Action Taken section completed upon safe energizing system.

Email: rstrege@villageofbellevue.org