



Electric Service Request Form



Name/Organization requesting services: _____

Contact Number: _____

Billing Address: _____

Service Location: _____

What kind of services are you needing:

Temporary Construction

Temporary Special Event

Permanent Power

Commercial : Contact the Electrical Supervisor

What voltage will be needed? _____

Temporary fee: \$320

Connect fee: \$15

Notes:

Signature _____

Date _____

CSR: _____

DATE: _____
MM DD YYYY

Electric Department

Supervisor- Bobby Stinnett: (573) 475-3249

Foreman- Cory Lenderman: (573) 380-1890