



SERVICE APPLICATION

APPLICATION GOOD FOR ONE YEAR ONLY

PO BOX 71249
 FAIRBANKS, AK 99707-1249
 1 (907) 458-5870 OR
 1 (800) 770-GVEA(4832)
 FAX: (907)458-6371
 WWW.GVEA.COM
 EMAIL APPLICATIONS TO:
 NEWCONSTRUCTION@GVEA.COM

DATE: _____

ARE YOU A MEMBER OF GVEA? YES NO

MEMBER NAME:	HOME/CELL/OTHER PHONE:	EMAIL ADDRESS:
MAILING ADDRESS: STREET, CITY, STATE, ZIP CODE		CONTACT/CONTRACTOR NAME & NUMBER:
LEGAL OWNER:	SIGNATURE OF OWNER/AGENT/TENANT	<input type="checkbox"/> <b style="background-color: yellow;">ADD TO MY EXISTING AUTO PAY
SERVICE ADDRESS (ADDRESS ASSIGNED BY BOROUGH/CITY REQUIRED WHERE APPLICABLE):		SUBDIVISION/LOT/BLOCK:

SERVICE INFORMATION

NUMBER OF METERS: _____ VOLTAGE _____ AMPS _____

METER BASE ON: BUILDING POLE OTHER

ARE THE CORNERS SET & FLAGGED: YES NO: WHEN? _____

IF EXISTING SERVICE-METER NUMBER: _____

TELL US ABOUT YOUR PROJECT: _____

NEW

SINGLE PHASE

PERMANENT POWER

RESIDENTIAL

UPGRADE

THREE PHASE

TEMP POWER

COMMERCIAL

GVEA USE ONLY

W.O.# _____ BY: _____ DATE: _____

SVC.# _____ CUST.# _____ MAP# _____

XFMR: _____ TOWNSHIP/RANGE/SECTION: _____ VOTING DIST.: _____

FEEDER: _____ PHASE: _____ PARCEL ID: _____

ROUTE: _____ LAT/LONG: _____

NOTES: _____

CLASS OF SERVICE

RESIDENTIAL

GENERAL

PRELIM DATE: _____

INITIALS: _____

PERM. IMP. APPROVED: YES NO

DATE: _____

ESTIMATED FEES

CONST CONNECT FEE: \$ _____

PERM IMPROVEMENTS: \$ _____

CIAC REFUNDABLE: \$ _____

CIAC NON-REFUNDABLE: \$ _____

CREDIT DEPOSIT: \$ _____

TOTAL REQUIRED: \$ _____

*THIS AMOUNT IS AN ESTIMATE ONLY AND IS SUBJECT TO CHANGE UPON VERIFICATION OF FIELD CONDITIONS AND/OR REQUIREMENTS.

PRELIMINARY SURVEY NOTES: