



CERTIFICATE OF POWER AVAILABILITY

CITY OF MILTON
1000 LAUREL STREET
MILTON, WA 98354
PHONE: (253) 922-8738 Ext. #1
EMAIL: PERMITS@CITYOFMILTON.NET

TO BE COMPLETED BY APPLICANT:

APPLICATION #: _____

Project Address: _____

Subdivision Project Name: _____ **Parcel Number:** _____

Type of Project (i.e., preliminary plat, short plat, etc.): _____

Proposed Number of Connections: _____

Customer Type (circle one): Residential Multi-Family Commercial Industrial

Projected Need (circle one): Within 1 year Within 3 years

Service Voltage: _____ / _____

Phase (circle one): 1 Phase / 3 Phase

Panel Size: _____ (Tacoma Power Plan Review required: over 400A and for commercial projects with a scope that covers more than 2,500 square feet – prior to Availability approval)

Type of Construction: ☐ New ☐ Existing **Type of Service:** ☐ Overhead ☐ Underground

Duration of Service: ☐ Permanent ☐ Temporary (Start and End Date) _____

One-line Diagram attached: ☐ Yes ☐ No

Load Calculations Back to Service: Please provide a load calculation based on NEC 220 or other appropriate articles.

Per NEC 2020, article title 230.85 Emergency Disconnects. For one- and two-family dwelling units, disconnect switches or circuit breakers on the supply side shall be installed and identified as EMERGENCY DISCONNECT or SERVICE DISCONNECT

COMMENTS: _____

Primary Distribution and Commercial Secondary require the following information:

- If partnership, legal names of all partners and spouses; or copy of Partnership Agreement specifying legal name of managing partner (if applicable)
- Recorded, executed legal description of the subject property
- Plot or plat plans with bearings and distances of lot lines and of the outside perimeter
- Roadway drawings which show elevations, curve data and pavement sections
- Storm and sanitary drawings where applicable
- Water line design drawings showing service locations (Water meter locations that straddle lot corners can create delays in designing electrical underground)
- An easement stipulating location and condition of use by others will be furnished to the City by the customer

Secondary Service at Residential Developments require the following Information on the Site Plan:

- Service size and locations of meter
- Driveways and building locations
- Routing of secondary conduits and conductors from pad mount transformer (if applicable)

General Information:

- If you have any questions, please contact the City of Milton Electric Supervisor
- Questions regarding construction standards for Tacoma Power, visit www.mytpu.org
- In addition to the new service application, an electrical permit must be obtained, and inspections must be completed to provide a new service to a project

I, the undersigned, or my appointed representative, have requested the Milton Electric Utility to certify the Utility's authorization to provide electric service to the project address listed above. I understand that this proposal or proposed addition to the electric system may require improvements or additions which would incur my financial obligation. Prior to final approval for construction of the proposed electric facilities, it is understood that a legal contract between myself and the Electric Utility which specifies terms of service, operational responsibility, and financial obligation may be required.

COMMENTS: _____

Print Name & Signature - Owner/Authorized Representative

Date

Address

City

State

Zip

Phone Number

Email Address: _____

FEE: Residential (up to four-plex) - \$150.00 / meter

Non-Residential (includes multiple family larger than four-plex and all commercial) - \$300.00 / meter plus any outside consultant fee.

This document constitutes certification of authorization to provide electric service. The Milton Electric Utility will assume full operational and maintenance responsibility for the electric service and equipment upon its completion up to and including the transformer.

**There may be an additional connection cost for this parcel located at _____.
(See Milton Municipal Code 13.08 if additional costs are required. The Electric Department can provide a cost estimate to the applicant upon request)*

City of Milton

Agency Name

Signatory Name

Electric Supervisor

Title

Signature

Date

Expiration Date: _____

TOTAL DUE: _____ **CMR#** _____ **DATE:** _____