gvec Delivering more.

APPLICATION

FOR RESIDENTIAL OR COMMERCIAL DEVELOPMENT

Please complete all applicable sections. Return this application along with all required documents and the engineering deposit to initiate service.

APPLICATION CHECKLIST

- ☐ Plat in PDF
- ☐ Plat in DWG with lot measurements
- ☐ Overall Utility plan in DWG
- ☐ Full construction plans
- ☐ Engineering deposit

1. DEVELOPMENT INFORMATION

Proposed Subdivision Name: _____ Unit No.: _____ (if applicable)

Location Description / Nearest Intersection: _____

City: _____ County: _____ School District: _____

Location in City Limits: ☐ Yes ☐ No Total Number of Buildable Lots: _____

Single Family Mobile Homes Allowed? ☐ Yes ☐ No Avg. Home Size (sq. ft.): _____

Multi Family Type: _____ No. of Proposed Units: _____

Commercial Type of Business: _____

Type of Electric Service Requested (check one): ☐ Underground ☐ Overhead

GVEC Construction Target Date: _____ Date for Service Requested: _____

Other Utilities to be included: (check all that apply)

☐ Water Company Name: _____ ☐ Comms Company Name: _____

☐ Sewer Company Name: _____ ☐ Comms Company Name: _____

☐ Gas Company Name: _____ ☐ Other Company Name: _____

Sewer lift station service needed in development: ☐ Yes ☐ No If yes: ☐ 3ph ☐ 1ph Unit of lift station site: _____

Amenity Center service needed in development: ☐ Yes ☐ No If yes: ☐ 3ph ☐ 1ph Unit of Amenity Center lot: _____

Existing overhead line in conflict with unit: ☐ Yes ☐ No Retaining walls in unit (location): _____

2. ADDITIONAL POWER NEEDS

Additional power needed for: (check all that apply)

☐ Gate ☐ Monument ☐ EV Charging Station

If so, what is the estimated service size? _____

3. SITE INFORMATION

Current soil conditions present at the site? (check all that apply)

☐ Dirt ☐ Sand ☐ Rock ☐ Other _____

4. STREET INFORMATION

Type of streets in subdivision / project? ☐ Public ☐ Private

If private, please provide the following:

Billing Name for Streetlights: _____

Billing Address: _____

Billing Tax ID: _____

Phone: _____

5. EXISTING GVEC INFRASTRUCTURE

Is there any existing GVEC infrastructure to be removed from the project site?

☐ Yes ☐ No

If yes, remove or relocate?

☐ Remove ☐ Relocate

Please provide details: _____

6. GVEC FIBER

Interested in pre-wiring homes for GVEC fiber?

☐ Yes ☐ No ☐ Not Sure

7. OWNER CONTACT INFORMATION

Individual / Company Name: _____

Main Point of Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Fed. Tax ID#: _____

8. ENGINEER / SURVEYOR CONTACT INFORMATION

Individual / Company Name: _____

Main Point of Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

*Note: Please return application along with final approved plat, CAD file, full civil plans and nonrefundable engineering deposit to inittate service. Deposit will be applied to final invoice.