

**BIG BEND ELECTRIC COOPERATIVE, INC.  
SERVICE UPGRADE / RELOCATION APPLICATION  
IRRIGATION**

Big Bend Electric Cooperative, Inc. requires that this form be filled in completely for all construction of new line extensions and service changes so that a study of line extension costs and anticipated revenues can be made. Applicant will coordinate service entrance location with Big Bend Electric Cooperative, Inc. Flag or mark the exact location where the service is requested.

PLEASE RETURN COMPLETED FORM TO: Big Bend Electric Cooperative, Inc.  
P.O. Box 348  
Ritzville, WA 99169

Please Print Legibly.

**ITEM 1 - GENERAL INFORMATION**

Applicant Name \_\_\_\_\_  
Last First Initial

Mailing Address \_\_\_\_\_  
Route/Street/P.O. Box

City State Zip Code

Telephone Numbers Home \_\_\_\_\_ Work \_\_\_\_\_

**Information For the Existing Service Being Relocated / Upgraded**

Account Numbers Of Services Being Relocated Or Upgraded :

\_\_\_\_\_

Account Name \_\_\_\_\_  
Last First Initial

Account Considered:  Individual  Corporation  Partnership  
 LLC  LLP  LP

Mailing Address \_\_\_\_\_  
Route/Street/P.O. Box

City State Zip Code

Telephone Number \_\_\_\_\_

**ITEM 2 - THIRD-PARTY INFORMATION RELEASE**

Please give the name and phone number of another person we can contact for information concerning this electrical service. ( electrician, contractor, etc. )

Contractors Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Name of Electrician \_\_\_\_\_

Phone Number \_\_\_\_\_

I, \_\_\_\_\_, authorize the above named Electrician and/or Contractor to be my representative for the duration of this project.

Signature: \_\_\_\_\_

**ITEM 3 - REMARKS**

Additional Remarks: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ITEM 4 - PROPERTY INFORMATION**

As Applicant, what is your interest in the property?

- Owner  Long term lease  
 Buying on contract  
 Renter  
 Other \_\_\_\_\_

**Legal Description:**

Section \_\_\_\_\_ Farm Unit \_\_\_\_\_

Township \_\_\_\_\_ North Block \_\_\_\_\_

Range \_\_\_\_\_ East

Subdivision \_\_\_\_\_

Lot \_\_\_\_\_ Block \_\_\_\_\_

Property Owner \_\_\_\_\_

**Property Owner Considered :**

- Individual  Corporation  Partnership  
 LLC  LLP  LP

**Property located in:**

- Adams County  Franklin County

Other

County Assessor's Tax Parcel ID Number

**ITEM 5 - OTHER INFORMATION**

A copy of the Statutory Warranty Deed or the Sales Contract, which shows ownership and the complete legal description of the property must be forwarded to our office upon submittal of this application. These forms are necessary for preparing easements and long term contracts.

A detailed sketch that shows the locations of buildings or irrigation pumps that you are requesting electrical service for is preferred. Please include any applicable landmarks, roadways, existing power lines, etc.

# Irrigation Load Data Information

## Source Of Water:

Streams   
  Lake   
  Canal   
  Well   
  Field Waste Water   
  Waste Way

The load information requested below is necessary for sizing equipment for your new service / service upgrade.  
 This form will need to be completed and returned to our office upon submittal of your application.

### MARK ALL APPLICABLE BOXES.

#### Type Of Service:

Irrigation  
 Frost Control / Cooling  
 Other \_\_\_\_\_

#### Type Of Motor Load:

Irrigation Pump  
 Pivot  
 Frost Control / Cooling  
 Other \_\_\_\_\_

#### Voltage Requirements:

120 / 240 Single Phase  
 120 / 240 Three Phase  
 240 / 480 Three Phase  
 277 / 480 Three Phase  
 120 / 208 Three Phase

How many days a year will you use power ? \_\_\_\_\_

### Motor Load Breakdown : ( List Each Motor Separately )

#### IRRIGATION PUMP MOTORS

Note : List under "EXISTING" only the motors that will remain at the site after completion of the upgrade.  
 List any additional existing motors that will be removed in the Remarks section on the front page.  
 All new motors should be listed under "NEW".

NEW				EXISTING			
HP	1 Or 3 Phase	Starter Type	Main or Booster	HP	1 Or 3 Phase	Starter Type	Main or Booster
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

#### PIVOT MOTIVE MOTORS

NEW				EXISTING			
HP	1 Or 3 Phase	Starter Type	Main or Booster	HP	1 Or 3 Phase	Starter Type	Main or Booster
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

#### FROST CONTROL AND / OR COOLING PUMP MOTORS

NEW				EXISTING			
HP	1 Or 3 Phase	Starter Type	Main or Booster	HP	1 Or 3 Phase	Starter Type	Main or Booster
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

NOTE : Are there any motors being installed that are classified as adjustable speed motors, variable speed motors, variable frequency motors, electronic speed control, etc.

Yes   
  No   
 If yes, list those motors again here. \_\_\_\_\_

PLEASE NOTE : 1. Incomplete information can result in delays in processing your application. The applicant is responsible for notifying Big Bend Electric Cooperative, Inc. Engineering Dept. of any changes in the above information.

2. The current irrigation service rate schedule requires that a facilities charge be paid prior to connection of the newly constructed service. The facilities charge is over and above any contribution in aid of construction or any extraordinary costs.

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINTED NAME OF PROPERTY OWNER: \_\_\_\_\_

SIGNATURE OF PROPERTY OWNER: \_\_\_\_\_ DATE: \_\_\_\_\_

**Copies of photo ID are required to verify above signatures.**