



**SPECIAL EVENT
REQUEST FOR ELECTRIC**

This form is in addition to the "Town Street Closure/Request for Services form. This form must be completed if electric service is required for any vendor/activity for an event. It is the event organizer's responsibility to coordinate with vendors regarding their electric needs; Berlin Electric Department staff will be glad to assist with any questions. Form must be signed and appropriate contact information provided to be considered. "Same as last year" will not be accepted for any category.

Today's Date: _____ Event start time: _____

Date(s) of the event: _____ Event end time: _____

Name of Event: _____

Number of vendors/activities needing electric service: _____

Contact Name: _____ Contact Phone (Day): _____

Sponsoring Organization _____ Email: _____

Signature: _____ Date: _____

Printed Name: _____

Side 2 must be completed.

NOTE: Electric service is available only in specific locations.

1. Complete the reverse of this form to determine vendors' electric needs. Your vendors should know their requirements.
2. Contact the Berlin Electric Department to discuss needs and to assist in determining the best location for specific vendors/activities requiring electric service.

Electric Utility Director Tim Lawrence
410-629-1713
tlawrence@berlinmd.gov

Reviewed by the Electric Utility Department: Date: _____ Initials: _____

Comments _____

DETAILS OF EVENT: Please copy this page as needed.

Vendor: _____ Phone: _____ Primary Contact: _____ Vendor Type: _____ Load Information <table style="width: 100%;"><tr><td style="width: 80%;">Lighting</td><td style="width: 20%; text-align: right;">_____ KW</td></tr><tr><td>Cooking</td><td style="text-align: right;">_____ KW</td></tr><tr><td>Water Heating</td><td style="text-align: right;">_____ KW</td></tr><tr><td>Miscellaneous</td><td style="text-align: right;">_____ KW</td></tr><tr><td>Specify Unusual Motors</td><td style="text-align: right;">_____ KW</td></tr><tr><td>Other: _____</td><td style="text-align: right;">_____ KW</td></tr><tr><td>Total Load</td><td style="text-align: right;">_____ KW</td></tr><tr><td>Specify Voltage</td><td style="text-align: right;">_____ KW</td></tr></table> Location of Service: _____ (determined w/Electric Department)	Lighting	_____ KW	Cooking	_____ KW	Water Heating	_____ KW	Miscellaneous	_____ KW	Specify Unusual Motors	_____ KW	Other: _____	_____ KW	Total Load	_____ KW	Specify Voltage	_____ KW	Vendor: _____ Phone: _____ Primary Contact: _____ Vendor Type: _____ Load Information <table style="width: 100%;"><tr><td style="width: 80%;">Lighting</td><td style="width: 20%; text-align: right;">_____ KW</td></tr><tr><td>Cooking</td><td style="text-align: right;">_____ KW</td></tr><tr><td>Water Heating</td><td style="text-align: right;">_____ KW</td></tr><tr><td>Miscellaneous</td><td style="text-align: right;">_____ KW</td></tr><tr><td>Specify Unusual Motors</td><td style="text-align: right;">_____ KW</td></tr><tr><td>Other: _____</td><td style="text-align: right;">_____ KW</td></tr><tr><td>Total Load</td><td style="text-align: right;">_____ KW</td></tr><tr><td>Specify Voltage</td><td style="text-align: right;">_____ KW</td></tr></table> Location of Service: _____ (determined w/Electric Department)	Lighting	_____ KW	Cooking	_____ KW	Water Heating	_____ KW	Miscellaneous	_____ KW	Specify Unusual Motors	_____ KW	Other: _____	_____ KW	Total Load	_____ KW	Specify Voltage	_____ KW
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