



Dear Applicant:

Thank you for contacting Inland Power & Light and inquiring about new electrical service. We have provided the following checklist to assist you in providing the documentation we **require** to begin processing your request.

- 1. \$150.00 Non-refundable engineering and mapping fee**
 - \$300.00 -Non-refundable for developments with five or more lots or parcels**
 - Non-refundable for commercial three-phase new services**
 - Non-refundable for line extension in excess of one mile**
 - \$525.00 Connection fee per single family residence in high density developments**
- 2. New Service Application**
- 3. Service Address**
(This is obtained from your county building/planning department - Applicant to supply)
- 4. Copy of one of the following Legal Description:**
 - Recorded Warranty Deed**
 - Schedule A of Final Title Insurance Policy**
 - Quit Claim Deed**
- 5. Easement**
(Please follow easement instructions carefully.)
- 6. Detailed map or sketch and directions to the property**
(Applicant to supply - Included)

Thank you for your cooperation. When you have all the required documents (Items 1-6), you are ready to submit the request. Once all requirements are complete and received, we will then schedule an Engineer to come out and meet with you or your designated representative.

**Please attach a detailed sketch or map of the property including landmarks, roadways, nearest neighbor and existing power lines. A monthly charge is billed on all installed services regardless of whether or not a meter has been set. This is to cover the fixed capital costs such as the transformer and wire. The engineering and mapping fee is non-refundable but the first design if paid will be credited against the cost of the line extension quotation. Good for 1 year from the time of line extension quotation.*



PO BOX A SPOKANE WA 99219-5000
PHONE (509) 747-7151 - FAX (509) 789-4229

Application fee of \$ _____ is due with the submission of this application.

*Denotes required information.

WORK ORDER # _____

*Applicant Name: _____ Joint Name: _____

*Mailing Address: _____ *City, State, Zip: _____

*Home Phone: _____ Work Phone: _____ Cell Phone: _____

Have you ever received electric service from Inland Power before? Mbr #: _____ Location: _____

Contractor Name: _____ Phone: _____

Location of New Service Existing Power is: [] Overhead [] Underground
New Service will be: [] Home [] Manufactured Home [] Shop/Garage [] Other _____
*Service Address: _____ *City, State, Zip: _____
*IPL Number or Tax Parcel #: _____ Distance from nearest power source to site is: _____ feet
(3" metal numbers/letters on poles; number/letter decals on power cabinets)

Load Information [] Residential [] Development - # of Lots _____ [] Commercial
Home Square Footage: _____ Service Size: _____ Amps (200 or 400)
Type of Heat: [] Electric [] Other: _____ [] Heat Pump - Size _____ Ton [] Air Conditioner
Additional Loads: [] Well - HP [] Shop - Amps

Temporary Service
[] Overhead [] Underground [] None
Date Required: _____

Permanent Service
[] Overhead [] Underground
Date Required: _____

Change in Existing Service
[] Upgrade [] Relocate [] Overhead to Underground [] Other: _____
Comments: _____

Applicant's Signature: _____ Application Date: _____

Inland Power & Light Use Only
219 CODE _____ PROJECT # _____ TYPE _____ TWP _____ WHS _____ RGE _____ SEC _____
TAX CODE _____ COUNTY _____ DEPOSIT PAID _____ CONSTRUCTION _____
ENGINEER _____ APPOINTMENT DATE _____



MEMBER INFORMATION FORM

The information requested below is necessary to establish electric service for you with Inland Power & Light Company. Please fill out all information requested below.

Service Address: _____

Effective Date: _____ Meter Read: _____

Occupant Name/s: _____ Spouse/Roommate: _____

SS#: _____ SS#: _____

Date of Birth: _____ Date of Birth: _____

Drivers License #: _____ Drivers License#: _____

Primary Phone #: _____ Secondary Phone#: _____

Mailing Address: _____

Employer: _____ Employer: _____

Work Phone#: _____ Work Phone #: _____

Reference not living with you: _____ Relationship: _____

Phone #: _____ Address: _____

A deposit may be required to establish electric service unless we receive a favorable report from the credit reporting agency when we process your identity verification. As required by the Fair Credit Reporting Act and the Fair and Accurate Credit Transactions Acts of 2003 and revisions thereafter, Inland Power & Light Co must take certain steps to verify the identity of all people applying for electric service.

If there are more than two people over the age of 18 occupying this location, please fill out additional forms with all information for everyone over the age of 18.



10110 W. Hallett Road • PO Box A • Spokane WA 99219-5000
Phone (509) 747-7151 • Fax (509) 747-7987

SITE DRAWING WORKSHEET

Please use the empty box above to provide a drawing of your construction site.

Please review the drawing legend and use the symbols shown to map your site plan.

Include the following on the drawing:

- ~Nearest public road and distance to proposed home site
- ~Nearest IPL facility (pole or transformer)
- ~Proposed home site and meter base location
- ~Proposed drain field and septic lines
- ~Fences, existing and future
- ~North arrow

DRAWING LEGEND	
□	Home/Buildings (label)
*	Meter Location
§	Septic Lines/Drain Field
=	Roads/Driveway
X	Fencing
≈	Streams
--	Other Cables or Pipes (label)

Right of Way Easement Instructions

In order to prevent delays in scheduling your new service job and to avoid problems with recording your easement with the county, please read the following easement instructions.

- *Do not alter or write in the margins.*
- *We can not accept faxed, copied or emailed easements.*
- *For each easement required a copy of the recorded Statutory Warranty Deed, Deed of Trust, Quit Claim Deed or Schedule A of final title insurance policy is needed to show proof of property ownership. These documents need to include the tax parcel number and legal description of property.*
- *Please leave the legal description and parcel number blank; Inland Power & Light will complete this portion. Any attachments must have at least 1” margins on all four sides. Maps must be legible and not have any lines or dashes that cover the text. All fonts used must be legible.*
- *All legal property owners must sign the easement.*
- *The signatures must be notarized. (IPL has notaries available)*
- *Please inform your notary that the stamp must be legible and not placed over any part of the written document otherwise the county will not record the easement.*

Please note when printing the easement off our website, your easement will not be accepted if font is less than 8 point or if any part of the text is not legible or if the margins do not meet recording specifications.

Thank you,

Inland Power & Light Design Department

PLEASE DO NOT WRITE IN ABOVE SPACE.
Page 2 of 2

IPL Work Order # _____

IN WITNESS WHEREOF, the undersigned have set their hands and seals this ____ day of _____ 20 ____.

Grantor's Signature

Grantor's Signature

STATE OF _____ }
COUNTY OF _____ } SS

On this day personally appeared before me

Grantor's Name/Printed

Grantor's Name/Printed

to be known to be the individual described in and who executed the within forgoing instrument, and acknowledged that (Circle one) HE SHE THEY signed the same as (Circle one) HIS HER THEIR free and voluntary act and deed for the uses and purposes therein mentioned.

GIVEN under my hand and official seal this ____ day of _____, 20 ____

Notary Public Signature _____

Notary Public in and for the State of _____ residing at _____

My commission expires _____

Place Notary Seal Here