

# LOW DENSITY - NEW

## our mission is our members



Dear Applicant:

Thank you for contacting Inland Power & Light and inquiring about a new electric service. We have provided the following checklist to assist you in providing the correct documentation **required** to process your application. Additional information can be found in Inland Power & Light's Electric Service Handbook at [www.inlandpower.com](http://www.inlandpower.com).

- ☐ **1. The following fees: (We accept cash, check or money order)**
  - \$250.00 Non-refundable engineering fee
- ☐ **2. New service application**
- ☐ **3. New member information form**
- ☐ **4. Service address**

This can be obtained from your county building/planning department
- ☐ **5. Detailed map or sketch and directions to the property**

(Applicant to supply - Include landmarks, roadways, nearest neighborhood and existing power lines.)

When all above requirements are completed (items 1-5), we will process the application and schedule an engineer to meet with you or your designated representative on-site. Items 6-8 must be provided prior to energizing your service.

- ☐ **6. Copy of one of the following legal descriptions:**
  - Recorded warranty deed
  - Schedule A of Final Title Insurance Policy
  - Quit Claim Deed

*Please attach to the enclosed easement; this will be used as Exhibit A.*
- ☐ **7. Notarized Easement**

Individual Easement(s) enclosed in packet.  
All legal property owners need to sign this document **exactly as their name(s) appear on the property deed**. IPL has a Notary available.
- ☐ **8. Electrical permit and meter base photo**

Electrician to email electrical permit and meter base photo to [newservice@inlandpower.com](mailto:newservice@inlandpower.com) when ready to energize.

Physical Address:  
10110 W Hallett Rd.  
Spokane, WA 99224

Please mail application to:  
PO Box A  
Spokane, WA 99219

Email:  
[newservice@inlandpower.com](mailto:newservice@inlandpower.com)

Phone:  
(509) 747-7151  
FAX (509) 789-4229

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## Member Information

\* ALL FIELDS ARE REQUIRED

\* Applicant's Name(s): \_\_\_\_\_ \* Email: \_\_\_\_\_

\* Mailing Address: \_\_\_\_\_

\* Phone Numbers \_\_\_\_\_ Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

\* Contractor: \_\_\_\_\_ \* Phone Number: \_\_\_\_\_

\* Schedule on-site engineering appointment with: ☐ Applicant ☐ Contractor Phone #: \_\_\_\_\_

## Permanent Service Location

\* Service Address: \_\_\_\_\_ \* Tax Parcel ID#: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Block/Lot # \_\_\_\_\_ Gate Code: \_\_\_\_\_

\* Closest IPL Pole #/Distance: \_\_\_\_\_ \* County: \_\_\_\_\_

☐ Site Built Home ☐ Manufactured ☐ Shop/Barn ☐ Accessory Dwelling ☐ Other

## Load Information

☐ Overhead ☐ Underground

\* Primary Heat Source: ☐ Electric ☐ Natural Gas ☐ Other \_\_\_\_\_

\* Electric Heat Loads: ☐ Electric Furnace: Baseboard/Wall-mounted ☐ Boiler/Radiant  
☐ Heat Pump Air Conditioner

\* Additional Loads: ☐ On-demand electric water heater \_\_\_\_\_ kW  
☐ Electric car charger \_\_\_\_\_ kW  
☐ Hot tub/Pool/Sauna \_\_\_\_\_ kW  
☐ Other \_\_\_\_\_

\* Electric Panel Size: ☐ 200 amp ☐ 400 amp ☐ Other \_\_\_\_\_

**Large Motor Loads** — Items over 2HP ☐ Well Pump \_\_\_\_\_ HP

I affirm that the above information is correct to the best of my knowledge. I understand that any changes I make could result in additional costs and delays in the installation of service.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Application Date

For office use only

\_\_\_\_\_  
Engineer

\_\_\_\_\_  
Appointment Date

WO# \_\_\_\_\_

Fee Paid \_\_\_\_\_

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\*\*\*Please fill out all information below to avoid delays in your application process\*\*\*

Name:		Name:	
Date of Birth:		Date of Birth:	
SSN:		SSN:	
Employer:		Employer:	
Work #:		Work #:	
Home #:		Home #:	
Cell #:		Cell #:	
Email:		Email:	
Name/Address of nearest relative not living with you			
Mailing Address:			

*Everything I have stated in this application is correct to the best of my knowledge. You are authorized to perform a soft credit check for verification and deposit determination.*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

For office use only

Deposit Required: ☐ Yes ☐ No

Membership #: \_\_\_\_\_

Deposit Amount: \_\_\_\_\_

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**I (we) hereby apply for membership in Inland Power & Light Company and in consideration of being accepted as a member, agree to comply with the Cooperative's Articles of Incorporation, bylaws, rules, regulations, and policies adopted by the Board of Trustees, and other laws or legally binding agreements regarding the Cooperative, as they now exist or as hereafter amended.**

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*Signature*

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*Date*

---

*Signature*

---

*Date*

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