



Utility Service Request

Installation : **FWA** **FGA** **JBER** Application Date : _____ Applicant Phone : _____
 Applicant Name : _____ Company Name : _____
 Applicant Signature: _____ Applicant Email : _____

Name of Contractor/Installer : _____ Phone of Contractor/Installer : _____

What utility is requested: Water Sewer Heat Electric Gas

Type of Service : New Replacement/Upgrade of existing service AND Temporary or Permanent

Will the work require demolition of existing service ? Yes No Date service required : _____

Building Number/Location of Service : _____

RFP Number : _____ Army Project Number and Name : _____

Who is the tenant? _____ Has the Contractor obtained a Dig Permit ? Yes No

Has the contractor read and understood the Doyon Utilities Design & Construction Standard for the applicable utility ? Yes No

NOTES :

Please complete the applicable sections below. If additional space is required to explain the project, attach additional pages.

WATER/SEWER

Calculated average daily water demand in Gallons/Day: _____ Calculated peak water demand in Gallons/Hour: _____
 Number of people to be served : _____ Total Fixture Count (per Uniform Plumbing Code): _____

STEAM

Calculated peak demand in BTUs per day or pounds of steam per hour : _____
 Size of each pressure reducing valve in lb/hr : PRV #1 _____ PRV #2 _____
 Total calculated steam load of all equipment in pounds per hour (nameplate data): _____ Bldg sq footage : _____

ELECTRIC

1-phase 120/240V 1-phase 240/480V 3-phase 120/208V 3-phase 277/480V Amps : _____
 Number of meters : _____ Attached Load calculations consistent with NEC 2014 Article 220
For electrical services 600A or greater, provide the following breaker settings at the building prior to energizing the service (as applicable):
 Maximum Continuous Rating Ir (A) _____ Long-Time Delay tr (s) @ 6x Ir _____
 Short-Time Pickup Isd (x Ir) _____ Short-Time Delay tsd _____
 Instantaneous Pickup li (x In) _____ Ground Fault Pickup Ig _____

GAS

Number of Meters Required:	Load Details				
	Appliance Type	# of Appliances	X	Load per Unit BTU/hr	Total Load BTU/hr
Delivery Pressure Required:			X		
			X		
7" WC (standard) 2psig			X		

RETURN FORM TO APPLICABLE OFFICE

Fort Greely
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 Tele : 907-869-3600

Fort Wainwright
 dufwadepot@doyonutilities.com
 Tele : 907-455-1571

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