Initiate the SRP processes required to support your new project by completing this "Plan Review Request Form." Please fill out all the required fields (*) and as much of the additional requested information as possible. DATE SUBMITTED:

DECLIEST	ER INFORMATION
-	GTER is you. Please provide your individual work place information, or if acting as an individual, your personal
information	
	name:
	dress:
	nber:*Email:
i none nun	ibel Elilali
	SLE : Please provide the following information about the company for which you are employed.
	npany:
	per:*Email:*
ivialling add	ress (if different than above):
REQUEST	ER'S CLIENT (AS APPLICABLE)
Please provi	de the following information about the company you are representing for this project.
*Company r	name:
	act:
	nber: Email:
PROJECT I	NFORMATION
*Name (Nar	ne used in all project communications):
*Reference	number (created by you or client):
	cation:
	eet address if available, or nearest major cross-streets. Example: NWC Baseline Rd. and Rural Rd.)
	Aunicipality:
	Residential Commercial Industrial Other
*OUESTION	: Will your project require new electrical service?
□ NO	If NO , an SRP Land Agent will be contacting you to discuss compatibilities with existing SRP facilities.
☐ YES	If YES, an SRP Project Leader will contact you to discuss any SRP issues related to your project.
	If you answered YES to the above, please provide the following information.
Requester's	legal Corporation/LLC/INC/Individual name and address to be placed on contracts (as registered per the ACC):
-	
	signature who will be signing contracts:
	Title:
i none num	Liliali.
HOA Legal E	ntity Information (as applicable)
Name:	Title:
Address:	
	per: Email: