



Pocahontas Electrical Service Request

Organization Name:
Contact Name:
Phone Number:
Mailing Address:
Email Address:
Electrical Needs: 110(s), 220(s), amps, etc.

Primary Use:

X	<i>Item</i>	<i>Quantity</i>
	Lighting	
	Refrigeration	
	Coffee Maker	
	Fountain Pop Machine	
	Roaster	
	Crock Pot	
	Frying Pan	
	Other (please list)	

Approximate # of outlets

Please attach a picture of your main electrical source (110/220).

List of other items you may need:

Please return this form by June 15th to:
 Diane Pattee
 1101 4th Ave NW
 Pocahontas, IA 50574