

This application is required for Algoma Power Inc. to provide an Offer to Connect for a new service, to reconnect a service that has been disconnected at the pole (meter removed), or for any modification to an existing service (increase service size, relocate service etc). **If this is a new service or service relocation, a Property or Subdivision plan must also be submitted with this application before a site visit will be scheduled.**

**Note: API must be contacted at least 24 hours in advance if you are unable to be present for the site visit. A fee will be charged for additional site visits due to changes requested by the customer/contractor or if items below are not satisfied.**

- The following MUST be located and marked prior to the site visit. Please check below and initial to indicate this has been completed:**
  - Property bars, building, driveway and pole locations:  Initials \_\_\_\_\_
- The customer or a representative MUST be present for the site visit. Please indicate below who should be contacted to schedule the site visit.** Customer  Contractor/Representative
- If disconnection of an existing service is required to complete the work requested below, I understand that a Reconnection Charge of \$185.00+HST will be billed to my account after the work has been completed. This charge WILL NOT be included on the Estimate included with the Offer to Connect.**  Initials \_\_\_\_\_

CUSTOMER INFORMATION			
(Customer information must match API account information for existing customers)			
Surname or company name	First name	Middle Initial(s)	
Mailing address—number & street	City	Prov/State	Postal/Zip Code
Telephone (     )	Mobile phone (     )	Fax (     )	
Email	Please indicate below how you would like to receive your completed Offer to Connect: Canada Post <input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/> Pick up <input type="checkbox"/>		
Authorization: The contractor named on this application is authorized to receive account information and act on my behalf:			
Customer Name: _____		Signature: _____	

CONTRACTOR/REPRESENTATIVE INFORMATION		
Contractor name	Email	
Telephone (     )	Mobile phone (     )	Fax (     )

SERVICE INFORMATION			
New Service <input type="checkbox"/>	Name and/or address of closest site with power (New services only)		
Service Upgrade <input type="checkbox"/> Service Relocation <input type="checkbox"/>	API Meter Number	API Account Number	
Service address—number & street	Municipality/Township	Lot	Concession
Planned Service size: 60A _____ 100A _____ 200A _____ Other _____ <b>General Service Application required for services over 200A</b>	1 phase _____ Voltage _____ 3 phase _____ Voltage _____	Overhead: _____ Underground: _____ Primary: _____ Secondary: _____	
API USE ONLY: Residential <input type="checkbox"/> Seasonal <input type="checkbox"/> General <input type="checkbox"/> Initials _____			
Site Visit Appointment: Date: _____			Time: _____

**Please provide a brief description of your service plan:** \_\_\_\_\_