

Florida State University
 Facilities Operations & Maintenance
 Utility Section
 105C MMA Building
 Telephone: 850.644.2025
 Fax: 850.644.1714

FSU Utilities Service Request

Request Date: _____

Effective Date: _____
 (Requested)

Contact Information (Contractor)

Company: _____
 Contact Name: _____
 Address: _____
 City, State: _____
 Zip Code: _____
 Phone: _____
 Alt. Phone: _____
 Fax: _____

Billing Information (Contractor)

Company: _____
 Contact Name: _____
 Address: _____
 City, State: _____
 Zip Code: _____
 Phone: _____
 Alt. Phone: _____
 Fax: _____

FSU Project #: _____

Building #: _____

Project Address: _____
 (Legal Address used for Permit(s))

Project Name: _____

Constr./Proj. Mgr.: _____

FSU Proj. Mgr.: _____

Demolition: Yes No
Remodel: Yes No
New Construction: Yes No

Utility Type: * **Electric** * **Water** * **Sewer** * **Gas** * **Refuse**

New Service/Campus New Service New Service New Service Roll-Off

New Service/Other Disconnect Disconnect Disconnect Size(s) _____
 (Ex: COT, Talquin, etc...)

Disconnect Meter Set Size(s) _____ Meter Set

Temporary Pole Size(s) _____ Size(s) _____ BTU'S _____

Meter Set Size(s) _____ Size(s) _____

Transformer Size(s) _____

AMP'S _____

* Note: If not a COT utility provider, please specify utility provider.

Supplemental Information: _____

