**ITP Form 3**

**UTILITY COORDINATION**

INSTRUCTIONS:

* + 1. Submit one copy of ITP Form 3 for each NEVI Zone Proposer is pursuing.
    2. **Proposer should delete any bracketed and italicized text and replace with the information requested therein.**
    3. Proposer should complete the Proposer’s portion of the form and coordinate with the applicable Utility Owner that serves the Project Site to provide preliminary information on the potential costs, ability to serve the requested load at the Project Site, and other information it deems useful for evaluating the utility services and costs at a specific site.
    4. Proposer should include a site plan when sending this form to the Utility Owner to help inform the Utility Owner’s responses.
    5. It is highly recommended that Proposers allow for a **minimum of four weeks** for utility companies to respond to a request to fill out ITP Form 3.
    6. For APS served sites, refer to the “NEVI RFP Guide for Site Applications-APS.PDF” provided in the RIDs.
    7. There is no page limit for ITP Form 3.

**To be completed by Proposer:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Proposer Information** | | | | |
| Proposer Name |  | | | |
| Contact Name |  | | | |
| Contact Address |  | | | |
| Contact Email |  | | | |
| Contact Phone |  | | | |
| **Site Host** **Information** (if different than Proposer) | | | | |
| Company Name |  | | | |
| Contact Name |  | | | |
| Contact Email |  | | | |
| Contact Phone |  | | | |
| **Electrician/Engineer** **Information** (if different than Proposer) | | | | |
| Company Name |  | | | |
| Contact Name |  | | | |
| Contact Email |  | | | |
| Contact Phone |  | | | |
| **Site Information** | | | | |
| NEVI Zone Number |  | | | |
| Address or intersection |  | | | |
| City |  | | ZIP plus 4 |  |
| EVSE location on site (lat/long): | |  | | |
| Parcel Number: | |  | | |
| County: | |  | | |
| Proposed in-service date: | |  | | |

| **Electrical Load Information** | | | | |
| --- | --- | --- | --- | --- |
| Type of Service: (select all that apply) | | | | |
|  | New Service | | | |
|  | Upgrade of Existing Service | | | |
|  | EV load will be separately metered from existing account | | | |
|  | EV load will be added to an existing account | | Account No. |  |
| Proposed Number of Chargers: | |  | | |
| Proposed Charger Size (kW): | |  | | |
| Requested Voltages (i.e., 3-phase 277/480V 4-wire): | |  | | |
| Service Capacity (amps): | |  | | |
| Load Requested (kVA): | |  | | |
| Any additional load to be added to the site (i.e., lights, security, etc.)? | |  | | |
| ***Behind the meter configuration*** | | | | |
| Existing Solar  Proposed Solar | | | | |
| If existing, provide details | | | | |
| [Details]. | | | | |
| Existing Battery Storage  Proposed Battery Storage | | | | |
| If existing, provide details | | | | |
| [Details]. | | | | |

|  |
| --- |
| **Site Exhibit** |
|  |

**To be completed by Utility Owner:**

|  |  |  |
| --- | --- | --- |
| **Utility Owner General Contact Information** | | |
| Utility Owner |  | |
| Contact Name |  | |
| Contact Email |  | |
| Contact Phone |  | |
| **Contact Information to Further Discuss Rates, Connection, Etc.** | | |
| Company Name |  | |
| Contact Name |  | |
| Contact Email |  | |
| Contact Phone |  | |
| **Utility Ability to Serve** | | |
| Note to Utility Owner regarding the equipment provided under the NEVI Formula Program: All utility upgrades for NEVI sites must meet Build America, Buy America Act compliance ([Federal Register: Build America, Buy America Compliance Guidance for Grants and Agreements](https://www.federalregister.gov/documents/2023/08/23/2023-17724/guidance-for-grants-and-agreements#:~:text=BABA%20required%20that%20by%20May,materials%20used%20in%20the%20project)). | | |
| Additional information can be attached to this data request sheet. For instance, a map of system capacity for a given area or a single letter from the Utility Owner describing available service for a given exit so as to avoid answering multiple individual requests. | | |
| Three-phase power available at EVSE location? | | [Y or N] |
| If power is not available, where is the nearest service? (i.e., lat/long, address, distance, direction)? | |  |
| Can requested connected load be served? (provide details in field below) | | [Y or N] |
| Utility input related to ability to serve: | | |
| [Details] | | |

| **Cost Estimate** |  |
| --- | --- |
| **Description** | Total Cost and Timeline |
| **High-level Engineering & Construction Cost & Time Estimate**  (This high-level cost\* and time estimate\*\* includes Power lines, Power Transformer, terminator pole, if applicable, Service Lateral or conductor and Metering.)  \*Cost estimate to be covered by Site Applicant. Estimate may change as additional project information is provided.  \*\*Time estimate is from the time of official service request and subject to change. | $ |
| Timeline: |
| **Additional Engineering & Construction Costs/Time Estimates**  Fees for preliminary design with engineer stamped electrical and site plans. | $ |
| Timeline: |
| Other utility costs not listed above. | $ |
| **Total Estimated Cost for Utility Sided Work:** | $ |
| **Total Estimated Timeline for Utility Sided Work:** | |
| [Timeline details] | |

Additional notes: