

Kansas City Board of Public Utilities 540 Minnesota Ave Kansas City, KS 66101 (913) 573-9922

OFFICE USE ONLY:
Date New Rate Effective:
Approved by: (Initials)

Please send completed form to Alfonso Garcia: Email: agarcia@bpu.com or Fax (913) 573-9921.

	Commerc	cial / Industr	ial I	Electric Heat Rat	e Apı	olicatio	n	
Customer Address In								
First Name		Name	F	Personal Phone #	Perso	nal Email Ad	dress	
				21 //		-		
Company Name		Account #	ŀ	Phone #	Comp	any Email Ad	ldress	
			4:				1 2 ·	
Billing Address			City			State	Zip	
Service Address Ch	heck if same add	dagg og abova:	City	,		State	Zip	
Service Address Cr	neck ij sunie uud	il ess as above.	City			Sidie	Ζ1μ	
2) BPU has the right to ins 3) I agree to promptly info 4) I understand the BPU, a Electric Rate Class who 5) At anytime, the BPU Box	nary source of h spect the service orm BPU if I no at its sole discre has been accep	leating, electric furno e to determine all of longer meet the reque tion, may elect not to ted. for not meeting	ace or the re iremer o acce and ad	heat pump for the entire pre quirements are being met. its of Numbers 1 through 3 a pt a customer into the Electr hering to the requirements si	bove. ic Rate C	lass and may under this or	vremove a customer from other policies of the BPI	ı the J.
Name (print):								
Signature:					Date	2; 		
Installation and Equip	ment Inforn	nation						
YEAR BUILT (approx.)				RESISTANCE HEAT	ING SYS	STEMS ON	LY:	
HEATED AREA (sq. ft.)				SYSTEM TYPE:				
Office		hool \Box		☐ Baseboard Resistan	ce 🏻 C	eiling Cable	☐ Cove Resistance	
Government				☐ Baseboard w/ Boiler	- □ F	loor Cable	☐ In-Floor w/ Boiler	
		tail 🔲		☐ Electric Furnace		ther		
Commercial / Industrial		her 🔲		KW INSTALLED				
Manufacturing	□ Lo	dging 🔲		SERIAL#				
INSTALLATION TYPE:				SECONDARY HEATING SYSTEM:				
☐ New Resistance Heating E				□ NONE		il	□ Natural Gas	
☐ Existing Resistance Equipment with Rate Change to Heat Plus ☐ Existing Air Source Heat Pump with Rate Change to Heat Plu ☐ Existing Geo Heat Pump with Rate Change to Heat Plus				□ Wood	□ Pi	ropane	☐ Other	
DATE INSTALLED		(of meter or heating		NEW RESISTANCE	HEATIN	G SYSTEM	S ONLY:	_
equipment)				TYPE OF SYSTEM REPLACED:				
				□ New Construction	□ Natu	ral Gas	☐ Resistance	
INSTALLER:		O		☐ Added Capacity	□ Oil		☐ Wood	
Business Name: (retailer o	ner or installing contrac	O Contract	or	☐ Propane	☐ Othe	r		
	y	•		AGE OF SYSTEM REPLACED? (yrs)				
				SERIAL#				

DISCLAIMER: Once verified, the appropriate All-Electric Rate will be effective in the next Bill Cycle.