



ELECTRICAL CONTRACTOR CONTACT INFORMATION

Please provide us with your current information.

Company Name: _____

Primary Contact Name: _____

Mailing Address: _____

Email Address of Primary Contact: _____

Primary Mobile Contact Number: _____

Business Contact Number: _____

APPLICATION FOR SINGLE PHASE METER REMOVAL CERTIFICATION

We as the electrical contractor agree to the terms and conditions under section 7 of guidelines for electrical contractors and have read and agreed to follow the Standard Work Method Procedure 2-3B ET include within this form.

Contractor's Name: _____

Contractors Signature: _____

City Approval: _____

If your company has multiple electricians, please attach a list of name and mobile numbers.

Please return completed form via mail or email to Summerside Electric

Mail: Summerside Electric, 275 Fitzroy St, Summerside, PE C1N 1H9

Email: SummersideElectric@city.summerside.pe.ca