

# Specialty Lines

## UNDERWRITERS

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### Public Entity Application Electric Utility Questionnaire F

Legal Name of Public Entity: \_\_\_\_\_ Effective Date: \_\_\_\_\_

1. Number of utility users: Industrial: \_\_\_\_\_ Commercial: \_\_\_\_\_ Residential: \_\_\_\_\_

2. Annual payroll (less clerical): \$ \_\_\_\_\_

3. Main location? \_\_\_\_\_

4. Total number of locations, including substations: \_\_\_\_\_ Years in operation: \_\_\_\_\_

5. Are all locations protected? .....  Yes  No

Fenced? .....  Yes  No

Lighted? .....  Yes  No

Alarms? .....  Yes  No

Other? \_\_\_\_\_

Describe controls at substation with reference to signage: \_\_\_\_\_

6. Surrounding area?  Rural  Metro Nearest residence: \_\_\_\_\_ (ft.)

7. Are there any PCB transformers? .....  Yes  No

Number: \_\_\_\_\_

When is replacement scheduled? \_\_\_\_\_

8. Who is responsible for inspecting operations? \_\_\_\_\_

9. How frequently is inspection done? \_\_\_\_\_

10. Who monitors and checks regulation flow? \_\_\_\_\_

11. Number of miles of distribution line? \_\_\_\_\_ Underground? \_\_\_\_\_ Overhead? \_\_\_\_\_

12. Describe pole and line maintenance (who maintains, how often inspected, how documented): \_\_\_\_\_

13. Are maps maintained? .....  Yes  No

14. Maximum annual kilowatts distributed? \_\_\_\_\_

15. Total annual revenues for electricity distributed? \_\_\_\_\_

16. Advise if generating electricity: .....  Yes  No

If "yes," advise the source of power:  Fossil fuel  Hydro-electric  Nuclear

What is total daily capacity? \_\_\_\_\_ Peak demand daily? \_\_\_\_\_

Total annual revenues for generation? \_\_\_\_\_

Generation: ..... % Distribution: ..... %

Number of miles of transmission lines? \_\_\_\_\_

17. What is power source? \_\_\_\_\_

18. Alternate power source? \_\_\_\_\_

19. Describe consumer complaint procedure, if any: \_\_\_\_\_

\_\_\_\_\_

20. Describe turn on/turn off procedures: \_\_\_\_\_