



## Rock Energy Cooperative

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2815 Kennedy Road • P.O. Box 1758  
Janesville, Wisconsin 53547-1758  
(608) 752-4550 • (866) 752-4550  
Fax: (608) 752-6620  
[www.rock.coop](http://www.rock.coop)

Dear Prospective Member:

Thank you for contacting Rock Energy Cooperative for new service.

Established in 1936, Rock Energy is a not-for-profit utility distributing safe and reliable electricity and natural gas to more than 27,000 meters across our nine-county service area in southern Wisconsin and northern Illinois. We are dedicated to providing members with the highest quality service at the lowest possible price.

This packet contains all the information you need to apply for electric and/or natural gas service. Details about electric installation can be found in the [Commercial Electric Service Standards](#) document. Natural gas details are available in the [Natural Gas Service Manual](#).

Please complete the enclosed application and return it along with the required documents by any of the following means:

<b>Email:</b>	<a href="mailto:NewMember@rock.coop">NewMember@rock.coop</a>	
<b>Fax:</b>	(608) 752-6620	(815) 389-9100
<b>Mail:</b>	Rock Energy Cooperative P.O. Box 1758 Janesville, WI 53547	Rock Energy Cooperative P.O. Box 126 South Beloit, IL 61080
<b>Drop off:</b>	2815 Kennedy Road Janesville, WI	15229 Willowbrook Road South Beloit, IL

We are looking forward to meeting your energy needs. If you have any questions, please call us at (608) 752-4550 or (866) 752-4550 between 7:30 a.m. and 4 p.m. weekdays.

Sincerely,

Rock Energy Cooperative



# Request for Commercial, Industrial, and Multi-Family Electric and Natural Gas Service

OWNER AND SITE INFORMATION			
Last Name	First Name	Middle Initial	SS #/ Federal Tax ID Number
New Service Address/ Fire # and Street		City/ State/ Zip	
Existing Mailing Address/ Fire # and Street		City/ State/ Zip	
Daytime Phone Number (include area code)	Evening Phone Number (include area code)	Email Address	
Check One <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village	City/ Town/ Village Name	Subdivision Name	Lot Number
County	Square Footage of Dwelling	Dwelling Type <input type="checkbox"/> Single Unit <input type="checkbox"/> Multi-Unit	Number of Units

BILLING INFORMATION	
Who should be billed for the electric/ natural gas installation? <input type="checkbox"/> Builder/ Contractor <input type="checkbox"/> Owner	Who should be billed for the electric/ natural gas usage during construction? <input type="checkbox"/> Builder/ Contractor <input type="checkbox"/> Owner

BUILDER/CONTRACTOR INFORMATION		
Builder/ Contractor Name	Contact Person Name	Federal Tax ID Number
Address/ Fire # and Street	City/ State/ Zip	
Daytime Phone Number (include area code)	Evening Phone Number (include area code)	Email Address
Electrical Contractor	Work Phone Number (include area code)	Cell Phone Number (include area code)
Plumbing/Heating Contractor	Work Phone Number (include area code)	Cell Phone Number (include area code)

ELECTRIC SERVICE REQUIREMENTS
Refer to ELECTRIC SERVICE REQUIREMENTS sheet

NATURAL GAS SERVICE REQUIREMENTS
Refer to NATURAL GAS SERVICE REQUIREMENTS sheet

APPROVAL and ACCEPTANCE		
I have reviewed the information listed above, attest to its accuracy and approve of its submission.		
Owner/Responsible Party Signature	Owner/Responsible Party Printed Name	Date

FOR OFFICE USE ONLY			
Date Received	Electric W/O No	Natural Gas W/O No	Member Account No.
Rock Energy Cooperative Representative		Map Location	

ACCEPTED BY ROCK ENERGY COOPERATIVE (REC)		
REC Representative Signature	REC Representative Printed Name	Date

## Electric and Natural Gas Service Agreement

1. The owner/responsible party understand(s) and agree(s) that prior to installation of underground electric lines or natural gas piping, the owner/responsible party shall have established the final grade of the route and that after installation of the line the grade shall not be increased or decreased more than 6" without the approval of Rock Energy Cooperative (REC). If applicant is not the owner, the applicant is responsible for obtaining such agreement in writing from the owner(s) and providing it to the Cooperative, at no expense to the Cooperative.
2. Easement: Right of Access
  - a. The owner/responsible party grant to the Cooperative the right to clear for installation and maintenance of its overhead and/or underground electric line or gas piping and to use any necessary equipment in, on and across the above described land, along highways and along fence lines thereon, and to extend such lines along or near property lines of such premises as may reasonably be necessary to extend service to future applicants for such service, and to permit the attachment of communication lines and equipment owned by others. If applicant is not the owner, the applicant is responsible for obtaining such an agreement in writing from the owner(s) and providing it to the Cooperative, at no expense to the Cooperative, unless it has previously been provided to the Cooperative.
  - b. The owner/responsible party jointly with other owners/responsible parties on the same extension shall, without cost to the Cooperative, maintain a right-of-way, which the Cooperative has the right to clear, adequate for the extension and along a route approved by the Cooperative.
  - c. If requested by the Cooperative, the owner/responsible party shall grant to the Cooperative an easement in recordable form conveying the rights and privileges in (a) and (b) above. If applicant is not the owner, the applicant is responsible for obtaining the easement in writing from the owner and to providing it to the Cooperative, at no expense to the Cooperative.
3. The owner/responsible party individually and jointly agree(s) to indemnify and hold harmless the Cooperative from all claims against the Cooperative because of any injury, disease or death sustained by reason of any act, omission or negligence of the owner/responsible party, or any agent, employee or subcontractor thereof.
4. This agreement shall become effective when acceptance of the application has been signed on behalf of the Cooperative.
5. The owner/responsible party is subject to the Cooperative's rates, bylaws, policies, rules and regulations.
6. The owner/responsible party is responsible for notifying the Cooperative of contaminated media (soil, groundwater, etc.) that may be present on the premises prior to Cooperative commencing installation or extension of service. The Cooperative reserves the right to consider alternate service routes, if necessary, to avoid contaminated media. The owner/responsible party may be held liable for additional costs incurred by the Cooperative if contaminated media is encountered during the installation of service.

If contaminated media is encountered during the installation or extension of service, the Cooperative shall terminate the installation or extension of service and notify the owner/responsible party. The owner/responsible party is responsible for reporting the discovery of contamination to the appropriate agencies and managing the contaminated media generated during the installation of service.
7. The Cooperative agrees to furnish, and the owner/responsible party agrees to take and pay for, utility service in accordance with provisions and rates; subject to all applicable rules of the Cooperative, including, but not limited to, terms and conditions on this page hereof; until such time as the owner/responsible party discontinues service or elects to make a written application for service under a different schedule. Such election, however, may not be exercised within a one-year period from the date of this application.
8. Owner/responsible party understands that once meters are set, billing will begin.
9. Owner/responsible party understands that upon transfer of demand billed accounts, the owner/responsible party who is responsible for the property at the time of the coincident peak, will be the party responsible for the monthly demand charge.
10. All property of REC, which includes, but is not limited to the meter and transformer, shall remain the property of REC, and shall not be modified or altered in any way. Any modification or alteration could be extremely dangerous and is illegal.

### Trench Marking Agreement

The owner/responsible party agrees the Cooperative will dig, trench, plow or bore on the property located at the above address for the installation of utility services. Utility rates are based on rough grade construction, meaning the Cooperative will backfill and smooth over any excavations that the Cooperative performs. *Final restoration, grass seeding, watering and mowing are the responsibility of the owner/responsible party.*

Prior to digging, trenching or boring, the Cooperative will identify the route of the proposed excavation. The Cooperative will notify other utility owners to facilitate the marking of existing underground utilities, including electric, telephone and cable TV.

The owner/responsible party agrees to physically mark the location of any and all owned obstacles that lie underground within ten feet of proposed excavation. Such obstacles include, but are not limited to, septic and sewer systems, buried wires for out-buildings or decorative lighting and LP gas lines. The owner/responsible party shall mark the location of all of these obstacles with stakes or flags or by painting the ground. The owner/responsible party hereby accepts any and all responsibility for damage to, or damage done by striking, any such underground obstacle which they have failed to mark correctly.

### Approval and Acceptance

I understand and agree to the terms and conditions as listed above in the Electric and Natural Gas Service Agreement.

Owner/Responsible Party Signature \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_



# Commercial, Industrial, and Multi-Family Electric Service Requirements

(This page to be completed by the Electrical Contractor)

ELECTRICAL CONTRACTOR INFORMATION			
Electrical Contractor Business Name		Contact Person Name	
Address		City	State      Zip
Phone No (day)	Phone No (alternate/ mobile)	E-mail Address	

PERMANENT SERVICE			
Estimated Date Permanent Service Will Be Needed (MM/DD/YY)			
Service Size			
<input type="checkbox"/> 100 Amps	<input type="checkbox"/> 200 Amp	<input type="checkbox"/> 320 Amps	<input type="checkbox"/> Other _____ Amps
Voltage			
<input type="checkbox"/> 120/240 (1-PH only)	<input type="checkbox"/> 120/208	<input type="checkbox"/> 277/480	<input type="checkbox"/> Other _____
Phase		Service Type	
<input type="checkbox"/> Single	<input type="checkbox"/> 3 Phase	<input type="checkbox"/> Underground	<input type="checkbox"/> Overhead
Distributed Generation?    ___Yes    ___No			

TEMPORARY SERVICE (IF REQUIRED)			
Estimated Date Temporary Service Will Be Needed (MM/DD/YY)			
Service Size			
<input type="checkbox"/> 100 Amps	<input type="checkbox"/> 200 Amp	<input type="checkbox"/> Other _____ Amps	
Voltage			
<input type="checkbox"/> 120/240 (1-PH only)	<input type="checkbox"/> 120/208	<input type="checkbox"/> 277/480	<input type="checkbox"/> Other _____
Phase		Service Type	
<input type="checkbox"/> Single	<input type="checkbox"/> 3 Phase	<input type="checkbox"/> Underground	<input type="checkbox"/> Overhead

ELECTRIC EQUIPMENT SPECIFICATIONS			
Cooling			
Computer Air Conditioning _____ Tons	Room Air Conditioning _____ Tons		
Refrigerated Space (32 to 45 degrees F) _____ Tons	Frozen Space (-20 to -10 degrees F) _____ Tons		
Process Cooling (32 to 40 degrees F) _____ Tons	Process Freezing (-10 to -25 degrees F) _____ Tons		
Heating			
Space Heating _____ kw	Water Heating _____ kw	Cooking _____ kw	
Lighting			
Indoor Lighting _____ kw	Outdoor Lighting _____ kw	Electric Vehicle Charging Station (s) _____ kw	
Motors (please attach motor schedule)			
Single Phase Motors _____ Total HP	Three Phase Motors _____ Total HP	Largest Motor _____ HP	
<b>VFD/ Soft Start is REQUIRED on all motors over 10 HP</b>			
<input type="checkbox"/> 1 – Phase <input type="checkbox"/> 3 – Phase			
Welders (attach list of all welders)			
Single Phase Welders _____ Amps    _____ Volts    _____ Qty	Three Phase Welders _____ Amps    _____ Volts    _____ Qty		
Miscellaneous			
Wall Receptacle Circuits _____ Amps    _____ Volts    _____ Qty	Wall Receptacle Circuits _____ Amps    _____ Volts    _____ Qty		
Other			
_____ kw	_____ kw	_____ kw	_____ kw
_____ kw	_____ kw	_____ kw	_____ kw

**\*\*\* (REQUIRED FIELD) Projected Running Demand Load:**    \_\_\_\_\_  kw     amps

This value is very important. The transformer will be sized based on this information. If the value submitted to Rock Energy, requires Rock Energy to purchase and install too large of a transformer, the member will be billed annually for unused capacity as outlined in the participating rate schedule and/or costs to replace and install an appropriately sized transformer.

APPROVAL AND ACCEPTANCE		
I have reviewed the information listed above, attest to its accuracy and approve of its submission.		
Owner/Responsible Party Signature	Printed Name	Date

FOR ROCK ENERGY USE ONLY
Estimated Average Annual Demand (kw)



# Commercial, Industrial, and Multi-Family Natural Gas Service Requirements

(This page to be completed by the Heating and/or Plumbing Contractor)

NATURAL GAS/HVAC CONTRACTOR INFORMATION			
Heating Contractor Business Name		Contact Person Name	
Address		City	State      Zip
Phone No. (day)	Phone No. (alternate/mobile)	Email Address	
Plumbing Contractor Business Name		Contact Person Name	
Address		City	State      Zip
Phone No. (day)	Phone No. (alternate/mobile)	Email Address	

SERVICE INFORMATION	
Estimated Date Permanent Gas Service Will Be Needed (MM/DD/YY)	Estimated Date Temporary Gas Service Will Be Needed (MM/DD/YY) <small>(This type of service is considered extraordinary and subject to approval)</small>
Load      Pressure	
Delivery Pressure (check with heating dealer if unsure of pressure, because there is a charge to change pressure after installation)	
Standard (7" wc)	2 psi      5 psi      10 psi      15 psi      Other _____ psi
Wall Construction at Meter Location	
Masonry/ Brick	Poured Concrete      Metal Wall Panel      Wood Frame

SPACE HEATING			
Indicate the type of facility by placing an "X" in the appropriate box below:			
Hospital	Hotel/ Motel	Offices	Restaurant      Retail      School      Warehouse/ Factory      Religious
Building's total heated floor area, in square feet: _____ Sq. Ft.	Total connected load of the building's space heating equipment, in BTUH: _____ BTUH	Reality Check: Expected connected load for heating equipment for this size building is shown at right. Value should be +/- 20% of the equipment connected load. _____ BTUH	Estimated Annual Therm Usage _____ Therms

INDUSTRIAL VENTILATION EQUIPMENT		
Industrial ventilation equipment (typically referred to as make-up air) is used to replace air exhausted from industrial processes.		
Weekly hours of operation of the make-up air equipment: _____ Hrs/Wk	CFM of outside air for the make-up air or the connected load of the make-up air unit: _____ CFM	Connected load: _____ BTUH
Indicate if the make-up air is direct-fired or indirect-fired by placing an "X" in the appropriate cell: Indirect fired make-up air units – these are vented units where the products of combustion are vented outside the building. These units are typically 80% efficient. Direct-fired make-up units – these are unvented units where the products of combustion are part of the supply air to the building. These units are typically 96% efficient.		Estimated Annual Therm Usage _____ Therms

ADDITIONAL EQUIPMENT			
Type of equipment:	Weekly hours of operation:	Total connected load in BTUH:	Estimated Annual Therm Usage
Hot water heaters for commercial, office, and retail buildings	_____ Hrs/Wk	_____ BTUH	_____ Therms
Hot water heaters for restaurants	_____ Hrs/Wk	_____ BTUH	_____ Therms
Instantaneous water heater	_____ Hrs/Wk	_____ BTUH	_____ Therms
Pool heater	_____ Hrs/Wk	_____ BTUH	_____ Therms
Cooking equipment	_____ Hrs/Wk	_____ BTUH	_____ Therms
Processing equipment	_____ Hrs/Wk	_____ BTUH	_____ Therms
Generator	_____ Hrs/Wk	_____ BTUH	_____ Therms
Corn dryer	_____ Hrs/Wk	_____ BTUH	_____ Therms
Other	_____ Hrs/Wk	_____ BTUH	_____ Therms

TOTALS			
Annual usage of all equipment equals:	_____ Therms	OR	_____ MCF

Send completed form to:

Rock Energy Cooperative  
P.O. Box 126, 15229 Willowbrook Rd.  
South Beloit, IL 61080-0126  
(866) 752-4550



# Rock Energy Cooperative Natural Gas Disclosure Statement (IL only)

**Important Notice:** This Disclosure Statement must be signed, dated and returned to Rock Energy Cooperative prior to the natural gas service being turned on at the address below.

Property Owner: \_\_\_\_\_ Phone Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address of Gas Meter: \_\_\_\_\_  
\_\_\_\_\_

The above owner is requesting REC turn on the natural gas service at the above address. The following are the terms and conditions associated with turning the service on. **After the meter is set, the owner is responsible to complete the following prior to sending in the Disclosure Statement:**

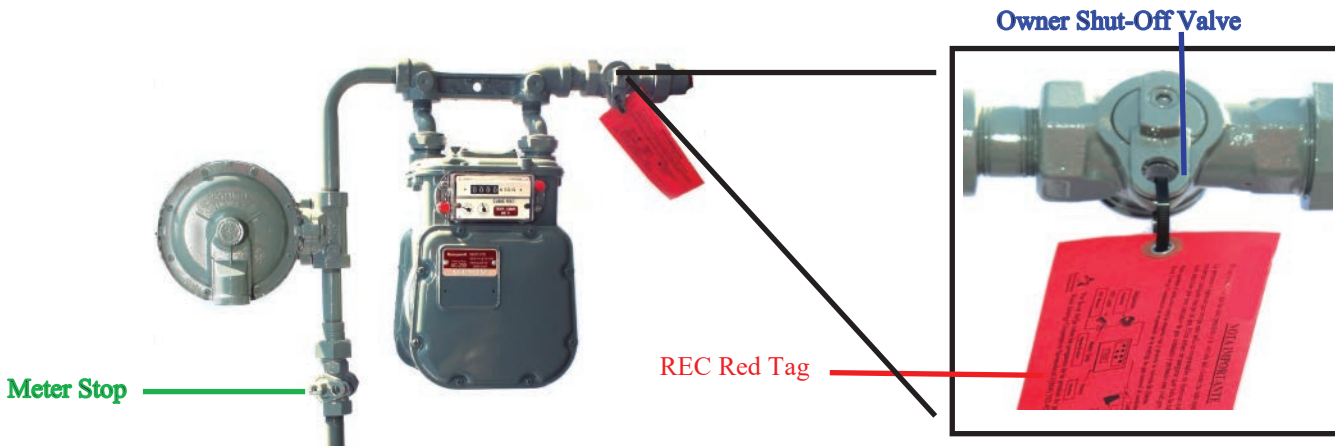
- Piping completed from the meter to their appliances
- Pressure test
- External piping painted to protect from corrosion
- Pipe passing through wall wrapped without seams or folds
- Comply to all plumbing codes
- Member underground piping must be preapproved by REC

REC will make one (1) trip, without charge, to turn on the **Meter Stop** at the above natural gas service (this provision does not include nonpayment issues). Any subsequent trips to the above location, beyond the initial service call, will be subject to fees and charges. Should the above natural gas service fail to pass an REC inspection, which will include a gas creep test, REC is required to issue a Caution Card. In addition, REC may require the above owner to furnish a completed and signed Piping Statement and/or approval from the County Plumbing Inspector. The owner is responsible for any and all costs that result beyond the owner's shut-off. The owner is responsible for removing the REC Red Tag, opening the Owners Shut-Off valve and for all reights at the above address (see diagram below).

***By signing below, I understand that I am requesting Rock Energy Cooperative turn on the natural gas service at the above address. I understand that Rock Energy Cooperative is not responsible for any and all claims arising from turning on the natural gas service. I agree to the above terms and conditions. I further understand that should I fail to pay any charges to Rock Energy Cooperative, the natural gas service is subject to immediate disconnection. I understand that as the property owner it is my responsibility to notify my tenant, if applicable, of the information provided in this document. I agree that I am responsible for any fees resulting in my failure to do so.***

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date



Meter's may vary slightly in appearance, but all have the same equipment in similar locations.