



**GRAND RAPIDS
PUBLIC UTILITIES**
Service is Our Nature

Grand Rapids Public Utilities Commission
500 SE 4TH St.
Grand Rapids MN 55744
(218) 326-7024

For Office Use Only

Project Number

WO#

Date Requested

**APPLICATION FOR PARTICIPATION
LOAD MANAGEMENT PROGRAM**

Name _____
Address _____

City/State/Zip _____
Telephone _____

Account # _____
Load Management Service _____
Rating (AMPS) _____
Equipment Load (WATTS) _____
Controller Group # _____
Controller Serial # _____

I wish to participate in the following load management programs:

- Off peak heating
- Off peak cooling (please select preferred method of control)
 - Continuous control
 - Cycled control
- Hot water heater

Description of alternate program:

I have received a copy of the regulations for participation in the LOAD MANAGEMENT PROGRAM. I have read, understand and will comply with the regulations. I give my permission to the Grand Rapids Public Utilities Commission (GRPUC) to operate a load control switch on my heating and/or air-conditioning equipment.

Applicant's Signature

Date

I attest that the installation is in conformance with GRPUC regulations and National, State and Local Electrical Codes to the best of my knowledge.

GRPUC Representative

Date

I, for myself and on behalf of my heirs, assigns, personal representatives and next-of-kin, HEREBY RELEASE AND HOLD HARMLESS, the Grand Rapids Public Utilities Commission, their officers, officials, agents and employees ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH OR LOSS OR DAMAGE TO PERSON OR PROPERTY, which may be caused or contributed to by my backup heating source, or lack of backup heating source at the address listed in the attached Application for Load Management, except that loss which is the result of gross negligence, willful acts or wanton misconduct of Releasees.

Applicant's Signature

Date