

PEMA REQUEST FORM ADDENDUM

GENERATORS

FACILITY NAME:	
PHYSICAL ADDRESS:	
FACILITY PHONE #	CONTACT NAME:

NAME OF ELECTRIC UTILITY COMPANY:	
HAS ELECTRIC SUPPLIER BEEN CONTACTED? YES NO	ESTIMATED RESTORATION TIME?
WHAT IS THE SIZE OF THE INCOMING ELECTRIC SERVICE (IN AMPS)?	
HAS THE FACILITY HAD AN ASSESSMENT OF POWER REQUIREMENTS? YES NO	
- IF AN ASSESSMENT WAS DONE, WHAT IS THE MAXIMUM GENERATOR SIZE NEEDED?	

DOES THE FACILITY HAVE AN EXISTING STANDBY/BACKUP GENERATOR? YES NO	
- WHAT IS THE SIZE OF THE EXISTING GENERATOR?	
- IS THERE AN AUTOMATIC OR MANUAL TRANSFER SWITCH?	
- TYPE OF FUEL SUPPLY FOR EXISTING GENERATOR? DIESEL FUEL NATURAL GAS PROPANE GASOLINE OTHER: _____	
- DOES THE GENERATOR POWER THE ENTIRE FACILITY OR ONLY CERTAIN CRITICAL AREAS?	
- IS THIS REQUEST FOR A GENERATOR, TO SUPPLEMENT THE EXISTING GENERATOR OR BECAUSE THE EXISTING GENERATOR HAS FAILED?	
- CAUSE OF EXISTING GENERATOR FAILURE (IF KNOWN)?	
- REPAIR SERVICE CONTACTED? (NAME)	- ESTIMATED TIME FOR COMPLETION OF REPAIRS?

HOW WILL THE GENERATOR BE CONNECTED TO THE FACILITY?	
- IF PLUG CONNECTION, WHAT IS THE TYPE AND SIZE?	- IF A PLUG CONNECTION EXISTS, DOES THE FACILITY HAVE THE CONNECTOR(S) TO HOOK TO THE GENERATOR WIRE?
- WILL GENERATOR BE HARD-WIRED TO THE FACILITY?*	- WHAT IS THE DISTANCE FROM WHERE A TOW-BEHIND GENERATOR CAN BE PLACED TO WHERE THE FACILITY CONNECTIONS ARE LOCATED?
- *IF IT WILL BE HARD-WIRED, A FACILITY-PROVIDED LICENSED ELECTRICIAN WILL BE REQUIRED TO MAKE THE CONNECTION.	
- NAME:	- PHONE NUMBER:
- DOES THE FACILITY HAVE ACCESS TO FUEL SUPPLIER TO MAINTAIN FUEL SUPPLY? YES NO	
- NAME:	- PHONE NUMBER:

INTERNAL DISTRIBUTION: ___PUC ___DEP ___ESF 6/8 ___INFRA BRANCH ___DGS ___OTHER: _____

GENERATOR SUPPLIED? YES NO SIZE: _____ SOURCE: _____

PEMA MISSION ASSIGNMENT # _____