



Application for Meter Socket Upgrade and/or Relocation

Submit this form to info@kiuc.coop or 4463 Pahee St., Ste 1, Lihue HI 96766 with a **copy of your picture ID, digital Plot Plan and CPR Map (if applicable)**. Failure to do so may delay the processing of your application.

Account Holder Information			
Last Name or Organization Name		First Name	Middle Initial Last 4 digits of SSN/Fed ID #
Primary Phone	Secondary Phone	Email	
Mailing Address (your bill will be mailed to this address)			
City		State	Zip

Existing Service Information			
Physical Address (Street # and Name, and Unit # where you would like electric service)			
City		Zip	Check One <input type="checkbox"/> House <input type="checkbox"/> Condo/Apt
Tax Map Key #	Is this a CPR Lot? <input type="checkbox"/> Yes (include CPR Map) <input type="checkbox"/> No		Subdivision Name
Type of Service <input type="checkbox"/> Overhead <input type="checkbox"/> Underground			

Electric Service Upgrade	
Complete this section to have your service upgraded. Charges may be assessed.	
Amps Being Requested <input type="checkbox"/> 100 <input type="checkbox"/> 200 <input type="checkbox"/> Other _____ (requires approval)	County Building Permit #
Electrician Name	Electrician Phone Number

Meter Socket Relocation	
Complete this section to have your meter socket relocated. Charges may be assessed.	
Type of Service <input type="checkbox"/> Overhead <input type="checkbox"/> Underground	County Building Permit #
Electrician Name	Electrician Phone Number
Submit a copy of digital Plot Plan & CPR Map. Plans need to be marked with an "X" where the meter socket is being installed. NOTE: County approved digital Plot Plan required if moving from home to pedestal.	

I understand that my service may be discontinued if I am in violation of the terms of the Service Order Agreement, the Company's tariff, and any laws, rules or regulations by any public authority.

Account Holder Signature	Date
---------------------------------	------