



Utility Management Consultants - Energy Conservation and Engineering Services, LLC



SAVINGS PROPOSAL INFORMATION WORKSHEET (REQUIRED FOR PROPOSAL)

Date _____

Company Name and/or Facility Name _____

Physical Address _____

City _____ State _____ Zip Code _____

Contact Name _____

Mailing Address _____

City _____ State _____ Zip Code _____

Phone Number (____) _____ Ext: _____ Cell (____) _____

Email _____ Fax (____) _____

1. Utility Provider _____

2. Utility Service Agreement Number or Type _____

3. Twelve Months Complete Electric Billing for Each Service Entrance _____

4. Power Factor, kW, KVa, kVar Each Billing Period _____

info@sevenutility.com ♦ www.sevenutility.com/eec

12300 Dundee Court ♦ Suite 215 ♦ Cypress, TX 77429
Local (281) 213-9910 ♦ toll free (866) 85-SEVEN ♦ fax (281) 213-9801



5. Type of Facility/Operation _____

6. Types of Equipment Used _____

7. Days of Operation per Week _____
8. Hours Open/Occupied _____
9. Running Hours of Equipment/Operation _____
10. Power Quality Problems - Losses Due to Harmonics, Surges, Lags or Phasing Problems

11. Dollar Amount Associated with Losses in the Last Two Years _____
12. Service Voltage _____ Single Phase _____ Three Phase _____ **Y or D** (circle one)
 (Wiring Configuration for D and Y: 3 wires = D / 4 wires = Y)
13. Operational Voltages: 240V _____ 208V _____ 480V _____ 600V _____ Other _____
14. How Many VFD's _____
15. How Much Total HP Controlled by VFD _____
16. How Many DC Drives _____
17. How Much Potential HP Controlled by DC drives _____

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