

Non-Residential Application for Critical Load

This form should only be used by facilities that, for health and safety reasons, require continuous electric service. A facility is defined as one service address. Please use multiple forms if providing multiple service addresses. Electric service is required at the locations contained within this form as a matter of public health and safety.

ACCOUNT NUMBER:	
Acceptant No. 11.52.11.	(As shown on the City of Lubbock Utilities bill)
ACCOUNT NAME:	
	(As shown on the City of Lubbock Utilities bill)
DOING BUSINESS AS:	(If the account name show above is different from the DBA, please provide DBA.)
PRIMARY BUSINESS FUNCTION:	
PRIMARY BUSINESS HOURS:	
PHYSICAL SERVICE LOCATION:	(On a series bestion as a few of faith, be a subtable bestial as a series
	(One service location per form. If your facility has multiple physical service locations, please provide additional forms.)
PRIMARY CONTACT NAME:	
	(Please provide a local person that that can be reached in case of emergency)
PRIMARY CONTACT PHONE NUMBER:	
NUIVIDER.	(Please provide a number that will be answered during non-business hours)
SECONDARY CONTACT NAME:	-
	(Please provide a person who can be reached in case of an emergency)
SECONDARY CONTACT PHONE NUMBER:	
THORE NOWBER.	(Please provide a number that will be answered during non-business hours)
SIGNATURE OF RESPONSIBLE PARTY	- /: DATE:
RESPONSIBLE PARTY TITLE: ————	

LP&L cannot guarantee uninterrupted power all of the time. If lives depend on an uninterrupted source of electricity, it is critical that alternate sources are available. You should also have a back-up plan in case LP&L is unable to restore power quickly.

If you have any questions regarding the use of this form, please contact Customer Service at (806) 775-2509.

Print and mail to Lubbock Power & Light, ATTN: Collections, P.O. Box 10541, Lubbock, TX 79408-3541; fax to 806-775-3722; or scan and attach to the email address of: LPLCustomerCare@mylubbock.us