

VCH PMO Guide - Electrical Service Information Form



This form is intended to capture the minimum information that is needed to track electrical loads added to each campus. Email the current drawings and this filled out form to VCHInfrastructureElectrical@vch.ca

Note: Fields marked with an * indicate required information.

Project name		*Submission date	
*Service address		*Expected energization date	
Legal description		VCH Project number	
VCH Site		VCH Building Designation	

Applicant information (Person who is completing this form)

*Name		*Business name	
*Role		*Address	
*Phone/Cell number		*Email address	

Note: Minimum of one other key contact is required

Key contact persons	Name	Email address	Phone number

Building and electrical details

*Service Term	Permanent	Temporary	*Service Type	Overhead	Underground
*Connection	Unit sub (kVA)	Or Secondary M/S	*Volts	*Amps	*Rating 80% 100%
*Unit count	Department Floors	Buildings Other	EV meters		
*Building	New Existing	Building area (m ²):	Proposed use of added load:		
Added Heavy Loads	L2 EV Charger Boilers	MCC's Chillers	Transformers Medical Imaging	Welding equipment Other: _____	HVAC
Primary building heat	Gas Electric	Heat pump	Other: _____	Transfer Switch Type:	Open trans. Closed trans.
Largest motor (hp): _____			*Total CEC calculated load (kW): _____		

Canadian Electrical Code (CEC) load calculation breakdown for this connection (Electrical drawings must also include these calculations)

Electrical heating load (kW)	Lighting load (kW)
Heat pump including geothermal (kW)	Air conditioning load (kW)
Motor load (kW)	Electric vehicle load (kW)
Other load (kW)	Description of other load

Metering Information

All new loads 200A and above are metered?	Yes
Are all generators related to the new connected loads metered?	Yes

Electrical Engineer of Record

*Name	*Phone#	*Email:	*License#:
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Load Breakout Information

	Net New Capacity	Project Used Capacity	*Main Substation Name and Existing System Tie-In Designation
*Vital	____ kVA ____ A	____ kVA ____ A	
*Delayed Vital	____ kVA ____ A	____ kVA ____ A	
*Conditional	____ kVA ____ A	____ kVA ____ A	
*Normal	____ kVA ____ A	____ kVA ____ A	

Drawing Design % (% , IFT, IFC)

_____ %

Expected Energization Date

DD/MM/YYYY

Expected Commissioning Date

DD/MM/YYYY

Target Construction Completion Date

DD/MM/YYYY

Arc Flash Study Completed and Attached?

Yes No

Capacity Check

*Total loads (including net new) within utility capacity for site Yes No

*Total loads (including net new) within generator capacity for site Yes No

25kV

Is the building already on 25kV? Yes No

Is this project enabling a 25kV conversion? Yes No

Is this the 25kV conversion project? Yes No

MANAGER OR DIRECTOR SIGN OFF FOR APPROVALS AND ACCOUNTABILITY

FMO representative for reviewing electrical load growth and interconnection locations

*Name	*Phone#	*Email	*Signature
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Facilities Infrastructure & Risk, Technical Services, Electrical

*Name Blair Steeves	*Phone# 604-230-4708	*Email blair.steeves@vch.ca	*Signature
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EES representative who reviews project electrical load growth and interconnection locations

*Name	*Phone#	*Email	*Signature
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CEC Calculated Load (kW): The load calculated in accordance with the applicable requirements of CEC Section 8. Submit a new application for load additions or service request changes.