



---

## AUSTIN ENERGY Contractor Disconnect Program Master Electrician Completeness Form

To be completed for each service address utilizing AE Disconnect Program.

**Job Address:** \_\_\_\_\_

**Permit Number:** \_\_\_\_\_

**Meter Number:** \_\_\_\_\_

**Project Scheduled Date:** \_\_\_\_\_

**Permit Activation Date:** \_\_\_\_\_

### Type of Work:

Service Rebuild (like-for-like)

Service Upgrade

Transfer Switch

Load side conductors

All electrical work installed as provided in the work description on this form and identified on the electrical permit work description is installed according to the provisions of the currently adopted Austin Energy Utility Design Criteria.

### Acknowledgement

I acknowledge all the information provided on this form is correct. I further acknowledge all work was installed by an individual who holds the current license required for the scope of work performed. I understand that any incorrect information provided may be grounds for the licensee to be removed from the Austin Energy Contractor Disconnect Program.

**Master License Holder Name:** \_\_\_\_\_

**Master License Number:** \_\_\_\_\_

**Master Signature:** \_\_\_\_\_

Email completed form to: [AEDisconnectProgram@austinenergy.com](mailto:AEDisconnectProgram@austinenergy.com)