

**General Information**

**ESR CHANGE RECOMMENDATION FORM**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

ESR Standard ID/Title: \_\_\_\_\_ Sheet: \_\_\_ of \_\_\_

Recommendation Type: Addition:\_\_\_ Change:\_\_\_ Correction:\_\_\_ Other:\_\_\_\_\_

IMPORTANT: Is this recommendation related to a safety concern? Yes: \_\_\_ No: \_\_\_

Recommendation: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason/Problem Encountered: \_\_\_\_\_


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your ideas and recommendations are important to assist us in providing the best possible Service Requirements for the construction and operation of the NPC distribution system. Use this form to communicate those ideas to us.

Please complete the above information giving as much detail as possible (use the back of this form, if necessary), and attach any marked up drawings or sketches. Send to:

NV Energy  
Team Leader, Distribution Standards  
P.O. Box 98910, M/S19  
Las Vegas, Nevada 89151-0001

Or call the Distribution Standards voicemail at: (702) 227-2918 or fax at: (702) 402-5489.

|   |      |       |       |                                |  |      |
|---|------|-------|-------|--------------------------------|--|------|
|  |      |       |       | Electric Service Requirements  |  | R-SB |
|   |      |       |       | ESR Change Recommendation Form |  |      |
| Drawn:  | Eng: | Appr: | Date: | Revision: 1                    |  |      |
| DH  | DH   | MES   | 2/08  | Page 1 of 2                    |  |      |

**General Information**

Additional information: \_\_\_\_\_

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|---|------|-------|-------|---------------------------------------|--|-------------|
|  |      |       |       | Electric Service Requirements         |  | <b>R-SB</b> |
|   |      |       |       | <b>ESR Change Recommendation Form</b> |  |             |
| Drawn:  | Eng: | Appr: | Date: | Revision: 1                           |  |             |
| DH  | DH   | MES   | 2/08  | Page 2 of 2                           |  |             |