

Back-up Generator Registration Form

If you own an emergency / stand-by electric generator to supply power during outages, it is critical for your safety and the safety of Ashland Municipal Electric line crews that your equipment be properly installed and that AME is aware that you have a generator. Please fill out the following form so that we can update our records.

Customer Account Information

Date:	Accoun	t #:		
Name:	Phone #			
Street Address:	Thore #			
Town/ City:				
Zip Code:	***************************************	***************************************		3
Generator Information				
Brand:		C	. (187 44)	
1 1000 8 1000 8 1000 1000 1000 1000 100		Generato	r size(Watts):	
Model:				
Fuel Type: □		Installed Date:		
Transfer Switch:	If Yes, Type:		Model:	
⊠Yes □No	□Automatic □Manual			
AME Use			×	
Reviewed By	THE STATE OF THE S	A STATE OF THE STA		AND COMMENTS OF THE PROPERTY O
Record Updated	7			
Follow-up	-			
Return To:			Questions:	

Generator Registration Ashland Municipal Electric Dept. 6 Collins St. Ashland, NH 03217 Telephone: 1-603-968-3083

Email: Operations@AshlandUtilities.Com