

## ELECTRICAL DEVICES INSTALLATION COMPLETION DATE

Information required by MDOT to complete billing process

COMPLETE AND RETURN

REGION: 1 2 3 4 5 6 7

FILE REF.	W.O. NO.	
LOCATION		
WORK TO BE PERFORMED BY		
COMPLETION DATE	CIRCUIT NO.	
CABLE NO.	PAIR NO.	
WATTAGE CHANGE Yes No	UTILITY Detroit Edition Consumer Energy Other	
SIGNATURE	TITLE	DATE

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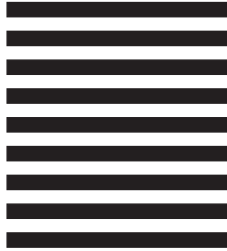
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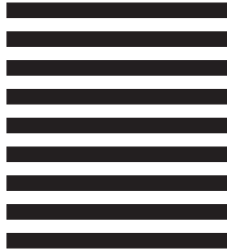
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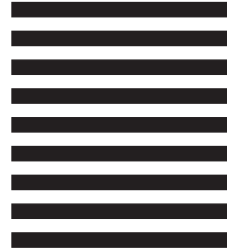
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