

DTE Energy Customer Connection Estimate Form

Please complete all fields to assist us in providing you with the most accurate costs associated with connection to the system and availability of electricity and gas. If you have any problems completing the technical information, (e.g. maximum electrical demand) contact your electrical contractor. If they are unable to assist you, contact DTE Energy's Economic Development Department for assistance at 855.367.0255.

Business Name _____ Submission Date _____

Contact Name _____ Title _____

Phone Number _____ Ext. _____ Email Address _____

*Project Location _____

Type of Production Operation (e.g. Data Center) _____

Address _____ City _____ State _____ Zip Code _____

** Location of the proposed operation: If it is a Greenfield site a descriptor might be a Google Map, longitude & latitude, or map of the location. Please be as specific as possible.*

Please provide the following information based on your current estimates:

1. Weekday (Monday — Friday) hours of operation (e.g. 8 a.m. — 5 p.m.) _____
2. Weekend hours of operation (e.g. 8 a.m. — Noon Saturday, closed Sunday) _____
3. Please indicate any special equipment (e.g. 100 HP motors or larger) _____
4. Maximum electrical demand including power factor (kVA or kW) _____
5. Average monthly electrical demand (kVA or kW) _____
6. Percent of on-peak usage (Total hours of weekly usage during on-peak hours (11 a.m. — 7 p.m., Monday - Friday) as a percent of your total hours of weekly operation) _____
7. What is the planned production phasing of your operation?
(e.g. 50% production capacity the first six months, 75% the end of year 1, 100% the end of year 2) _____
8. Do you need redundant power (electric power from two different sources) at the site? Yes No
9. Does your operation have a natural gas usage component in your production operation? Yes No
10. What amount of natural gas do you expect to use on a weekly basis?
(Please account for shifts and weekend production) BTU/HR _____
11. What is the input gas load in BTU/hr or cubic feet/hr for all of the natural gas equipment you expect to use? _____
12. What delivery pressure (inches water column or psig) after the meter do you require for the operation of your equipment? _____
13. Please indicate your future natural gas usage in anticipated production growth.
(Pressure and BTU/hr) _____
14. Do you have a similar operation at another location? Please attach utility bills, if available. _____
15. When is your anticipated start date? _____

Thank you for choosing Michigan!

DTE Energy Economic Development

Promoting sustainable economic growth through public and private partnerships

