

REQUEST FOR INSTALLATION OF SKYCAP

Name: _____

Physical Address: _____

Mailing Address: _____

Phone: _____

Reason for Request: _____

It is understood that the person making the request will assume responsibility for the materials cost (available from PNM). PNM will install Skycap at no cost to the customer. Present this form to PNM at in 3815 N. Swan in Silver City, to order Skycap.

Signature _____

The Town of Silver City hereby requests PNM to install Skycap in the following area:

Address: _____

Location: _____

Pole #(s): _____

Approved by _____

Date: _____