REQUEST FOR DUSK-TO-DAWN AREA LIGHTING

To request the installation of a dusk-to-dawn area within Grand Island Utilities service area, complete and submit the following petition to:

Attn: Dusk to Dawn Light Request
City of Grand Island Utilities Department
P.O. Box 1968
Grand Island, NE 68802

We the undersigned request to have a dusk-to-dawn area light located on:

Street/Alley: __________________________________________

Located Between: ___________________________________ And: ___________________________________

Contact Name: ___________________________________ Signature: ___________________________________

Address: __________________________________________

Daytime Phone Number: ________________________________

A light may be considered for installation upon receipt of a valid petition and according to City of Grand Island streetlight criteria. Signatures of empty lots are not required.

Generally, a dusk-to-dawn area light may be installed, if the request meets all the following criteria:
1. A light will only be installed to light a private area from dusk to dawn within the Grand Island service area.
2. Location approval will be based on the obstructions, and service availability.
3. Where electrical service is only available by crossing private property, the affected property owner shall grant full access to the City Utilities Department to the power source.
4. Signatures from two (2) residents are required each way from the proposed location on both sides of the street/alley, for a total of four (4) addresses.

Luminare will be selected by the Electrical Dept. and provided from Electrical Dept. stock. For installation on an existing wood pole, and connected to existing overhead secondary conductors on such pole, the rate is $0.76 per watt per year, billed on a monthly basis subject to change per the rate structure. Power Cost Adjustment is not applicable to the area lighting rate.

The contract period and conditions for such lights is available for a minimum period of 24 months and thereafter until termination by thirty (30) days notice in writing. The City of Grand Island will install, own, and operate and maintain all area lighting equipment under this schedule. If underground service is desired, approval of the City must be obtained and the additional cost there of shall be paid in advance to the City by the consumer on a nonrefundable basis.

The burning of the lamps shall be controlled by automatic control equipment installed by the City and the burning time shall be approximately thirty minutes after sunset to approximately thirty minutes before sunrise. The City shall be notified by the consumer of any operational failure of lamps. Lamp replacement or repairs will be performed only during regular working hours.

If extension of an overhead or underground service or special materials are required, prior approval of the City must be obtained. All additional cost for materials and labor shall be paid in advance to the City, by the consumer, on a nonrefundable basis.

Revision: August 20, 2015
For information on area lighting options, please contact the Utilities Department at: (308) 385-5471, Monday through Friday from 8:00 a.m. to 5:00 p.m., or via email at giudmeter@grand-island.com.

Authorizing Signatures:

1. __________________________________________  __________________________________________  __________________________________________
   Home owner - print name                      Address                                      Phone
   ____________________________                ______________________________  _____________________
   Signature                                                                                           Date

2. __________________________________________  __________________________________________  __________________________________________
   Home owner - print name                      Address                                      Phone
   ____________________________                ______________________________  _____________________
   Signature                                                                                           Date

3. __________________________________________  __________________________________________  __________________________________________
   Home owner-print name                        Address                                      Phone
   ____________________________                ______________________________  _____________________
   Signature                                                                                           Date

4. __________________________________________  __________________________________________  __________________________________________
   Home owner-print name                        Address                                      Phone
   ____________________________                ______________________________  _____________________
   Signature                                                                                           Date