



SITE ASSESSMENT FORM

General Information

Point of Contact: _____ Email: _____ Phone: _____

Business Name: _____

Site Owner: _____

Type of Location: _____ Industry: _____

Site Address: _____

City: _____ County: _____ State: _____ Zip Code: _____

GPS Coordinates for EVSE location – Latitude: _____ Longitude: _____

Type of Charger requested: Level 2 – Public Level 2 – MUD/Fleet Level 2 – Residential DCFC

Parking Infrastructure

Type of parking: Surface Lot Parking Structure Underground Other: _____

Type of occupancy: Public Private Workplace Total # of parking spots: _____

Parking cost: Free Paid Accessible for LD/MD Trucks & Buses: Yes No

Cellular coverage (list carriers): _____ Wi-Fi available: Yes No

Safety measures available: _____

Electrical Infrastructure

Grid voltage required: 208V 240V 480V Existing panel: Single Phase Three Phase

Is there electrical infrastructure for EVSE already in place? Yes No

Is concrete work required? Yes No Is trenching required? Yes No

Is the property on Protected or Tribal wetland: Yes No Is the structure historic? Yes No

Usage

Payment Structure: Free Usage fee Other: _____ Number of ports requested: _____

Installation Type: Wall Mounted Pedestal Mounted Pedestal Type: Rectangle Triangle

Nearby attractions: _____

Project Team Use

Charger Type: _____ Approved by: _____ Date: _____