Plateau EC Application for Electric Service – Sole Proprietor, Partnership

The undersigned (hereafter called the "Applicant") hereby applies for membership in and agrees to purchase electric energy from Plateau Electric Cooperative (the "Cooperative") on the following terms and conditions:

- 1. The Applicant will pay a \$5.00 membership fee to the Cooperative.
- 2. The Applicant agrees to pay for all service rendered or reserved for use when bills are rendered in accordance with the rates, rules and regulations of the Cooperative in effect at the time the service is rendered.
- 3. The Applicant agrees to comply with and be bound by the Articles of Incorporation, Bylaws, rules and regulations, and rate schedules of the Cooperative and acknowledges that from time to time such Bylaws, rules and regulations, and rate schedules may be altered, amended or repealed by the Cooperative in its sole discretion and that such alteration, amendment or repeal shall affect the Applicant's obligations hereunder.
- 4. It is agreed that the Cooperative may require, as security for payment of bills, a cash deposit or other security in such amounts as it may deem adequate. The Applicant is responsible for any and all collection fees associated with the collection of delinquent bills, which may amount to 35% of the total amount of delinquent bills, in addition to reasonable attorney fees and court costs. The Applicant acknowledges that he/she has read and understands the above.

Your application will be processed as soon as possible unless you specify a different effective date.

| [Please note requested effective date of se | ervice] |] |
|---|------------------------|---|
| Please Print | | |
| Business Name | | |
| Sole Proprietor | Partnership | |
| Service AddressStreet | | |
| Street | City | |
| Rilling Address (if different from service address) | | |
| | | |
| | | |
| EIN# | Contact Name | |
| Dhana Hataamiaa laastian | Contact # | |
| Phone # at service location | Contact # | |
| Name of Owner(s) | Social Security # | |
| | | |
| Name of Owner(s) | Social Security # | |
| (List additional owners and their social security numbers | on other side of form) | |
| Signature | Date | |
| Signature(Owner/General Partner) | | |