

MEMBERSHIP AND ELECTRIC SERVICE APPLICATION
RICHLAND ELECTRIC COOPERATIVE

**The undersigned hereby applies for membership in and electric service from
Richland Electric Cooperative and agrees:**

- Each member shall, as soon as electric energy shall be available, purchase from the Cooperative all electric energy purchased for use on the premises specified in his application for membership, and pay therefore at rates which shall from time to time be fixed by the board. Production for use of electric energy on such premises regardless of the source thereof, by means of facilities which shall be interconnected with Cooperative facilities, shall be subject to appropriate regulations as shall be fixed from time to time by the board.
- To comply with the articles and bylaws of the Cooperative and reasonable rules and regulations adopted by its board of directors there under, including the execution of any separate agreement where required by the Cooperative's standard extension rules and the granting of a reasonable right of way easement for rendition of service to applicant or neighbors.
- That membership in the Cooperative shall be effective upon receipt of service and shall be issued in the joint names of applicant and his or her spouse, if any, with right of survivorship, unless otherwise designated by the applicant in writing.
- The Cooperative is authorized to enter a subscription in my name to the Wisconsin Energy Cooperative publication at a rate as the board of directors may from time to time establish to be paid for me by the Cooperative out of monthly electric energy payments made by me and other members of the Cooperative in the same manner as are other expenses of the Cooperative.
- I/we hereby authorize Richland Electric Cooperative, or its duly authorized agents, to verify my past and present bank accounts, order a consumer credit report and verify other credit information to determine if a meter deposit is required. This information is for the confidential use of Richland Electric Cooperative. A photographic or carbon copy of this authorization [being a photographic or carbon copy of the signature(s)] may be deemed to be the equivalent of the original and may be used as a duplicate original.

Applicant/Organization Name (print) _____ **Date of Birth** _____

Social Security #/Federal Id # _____ **Driver's License #** _____

Co-Applicant Name (print) _____ **Date of Birth** _____

Social Security # _____ **Driver's License #** _____

Mailing Address _____

Email Address _____

Home Phone # _____ **Cell Phone #** _____ **Work Phone #** _____

Address Requesting Service @ _____ <-----Is this your primary residence? (Please circle) Yes No

Are you **Owner** or **Renter** **If renter who is landlord?** _____ **Landlord phone #** _____

Applicant Signature _____ **Date** _____

Co-Applicant Signature _____ **Date** _____