

Residential Membership Service Contract

Do Not Use – Office Use Only

Member Number _____
Account Number _____

APPLICANTS

* Full Name of Member			* Full Name of Joint-Member		
Social Security #			Social Security #		
Service Address					
* Service Address			Mailing Address (If different from service address)		
* City	* State	* Zip Code	City	State	Zip Code
* Home Phone #	Cell Phone #		Home Phone #	Cell Phone #	
E-mail Address			E-mail Address		

EMPLOYMENT INFORMATION

<input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Other _____			<input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Other _____		
* Employer of Member			* Employer of Joint-Member		
Address of Company			Address of Company		
City	State	Zip Code	City	State	Zip Code
* Business Phone #			* Business Phone #		
If Self-Employed: Name of Business			If Self-Employed: Name of Business		
Nature of Business			Nature of Business		

RENTAL INFORMATION

* Owner's Name and Phone Number			(In case of fire, burglary or power outage, etc.)		
Address			Name	Phone	
City	State	Zip Code	Relationship		
* Phone #			Name	Phone	
<input type="checkbox"/> Own <input type="checkbox"/> Renting			Relationship		

***Required**

The undersigned, hereinafter called the Member, agrees to become a Member of Rappahannock Electric Cooperative, a Corporation, hereinafter called the Cooperative, and the member and the Cooperative agree as follows:

- When the Cooperative makes electric energy available to Member, Member agrees to: be a Member, purchase from the Cooperative, and pay as billed to the Cooperative for all electric energy required from the Cooperative to be used on premises now owned or occupied by the Member, in accordance with the rate schedule and terms and conditions established by the Cooperative and agreed upon by the Rural Utilities Service of the United States of America. The minimum monthly charge for electric service will be that which is specified in the applicable rate. A connection fee will appear on the first billing.

2. The Member hereby grants to the Cooperative, when applicable, the right and easement to construct, operate, repair and maintain on the premises herein described, and in or upon all streets, roads, or highways abutting said premises, its electric distribution and service lines and equipment, and also the right to cut or trim trees necessary to keep them clear of all parts of the electric system.
3. The Member will comply with and be bound by the provisions of the bylaws, rules and regulations of the Cooperative, tariffs and terms and conditions filed with the State Corporation Commission, including the provision that service shall be disconnected if bills are not paid within the prescribed time period.
4. It is understood a security deposit will be required unless **satisfactory credit** has been established with REC for a period of at least 12 months. The maximum deposit amount shall not be greater than an estimated billing for two months usage for the above service location requested herein.
5. Any person or entity owing a debt to the Cooperative shall not be allowed to join in the Cooperative or receive service from the Cooperative until the debt has been paid in full or arrangements satisfactory to the Cooperative have been made for the satisfaction of the outstanding debt.
6. The acceptance of this Application by the Cooperative shall constitute an agreement between the Applicant and the Cooperative, and the Contract for electric service shall constitute an agreement between the Member and the Cooperative.

* Member's Signature	Joint Member's Signature
Date	Date

Rappahannock Electric Cooperative is required by federal government regulations to report *Statistical Information* about members by racial or ethnic identification.

Completion of the following information is voluntary.

Statistical Information

- | | |
|--|---|
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> White |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Hispanic or Latino |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Native Hawaiian or other Pacific Islander | |

Demographic Information

Year of Birth: _____

Annual Household Income

- | | |
|--|--|
| <input type="checkbox"/> \$1-\$14,999 | <input type="checkbox"/> \$100,000-\$124,999 |
| <input type="checkbox"/> \$15,000-\$24,999 | <input type="checkbox"/> \$125,000-\$149,999 |
| <input type="checkbox"/> \$25,000-\$34,999 | <input type="checkbox"/> \$150,000-\$174,999 |
| <input type="checkbox"/> \$35,000-\$49,999 | <input type="checkbox"/> \$175,000-\$199,999 |
| <input type="checkbox"/> \$50,000-\$74,999 | <input type="checkbox"/> \$200,000-\$249,999 |
| <input type="checkbox"/> \$75,000-\$99,999 | <input type="checkbox"/> \$250,000+ |

Marital Status

- Married Single

Occupation

- | | |
|--|---|
| <input type="checkbox"/> Management / Professional | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Service | <input type="checkbox"/> Farm related |
| <input type="checkbox"/> Sales / Office | <input type="checkbox"/> Retired |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Other |

Estimated Home Value

- | | |
|--|--|
| <input type="checkbox"/> under \$100,000 | <input type="checkbox"/> \$300,000-\$349,999 |
| <input type="checkbox"/> \$100,000-\$149,999 | <input type="checkbox"/> \$350,000-\$399,999 |
| <input type="checkbox"/> \$150,000-\$199,999 | <input type="checkbox"/> \$400,000-\$449,999 |
| <input type="checkbox"/> \$200,000-\$249,999 | <input type="checkbox"/> \$450,000+ |
| <input type="checkbox"/> \$250,000-\$299,999 | |

In what year was your home built? _____

Date Received in Office