



Online Form Instructions

- For the purpose of ECI REC online forms, when the word “signature” appears, a typed, legal name is an acceptable substitute. As long as the complete, legal name appears in each blank for which a signature was requested, the form is accurate and binding (pending accurate completion of all other form sections). It is not necessary to print and sign the form if users plan on taking advantage of the “submit by email” option provided on the final page of each form.
- Some rebates may require the actual signature of mechanical engineers. ECI REC will follow-up with members applying for those rebates as necessary.
- Please do not fill out the “office only” sections of the form. Tab past them when filling out the form.
- Completed forms and required sales receipts or invoices may also be submitted to ECI REC via fax at (319) 443-4359. Please submit both the completed form and accompanying invoice(s) using the same method—fax or email—to ensure they arrive together at ECI REC.

**East-Central Iowa Rural Electric Cooperative**

2400 Bing Miller Lane | PO Box 248 | Urbana, IA 52345-0248

Ph: 877-850-4343 | F: 319-443-4359 | ecirec@ecirec.coop

www.ecirec.coop

Tree Permit

Location _____

I, the undersigned, having authority to do so, hereby grant East-Central Iowa Rural Electric Cooperative authority to ☐ prune, ☐ top, ☐ remove, ☐ chemically treat, the tree, trees or brush described below which interfere with the service supplied the members of this Cooperative at no charge to the undersigned.

<u>TREE SPECIES</u>	<u>DIAMETER AT BASE</u>	<u>APPROX. HEIGHT</u>	<u>BRUSH TO BE</u>
_____	_____	_____	<input type="checkbox"/> Left
_____	_____	_____	<input type="checkbox"/> Chipped
_____	_____	_____	<u>LOGS TO BE</u>
_____	_____	_____	<input type="checkbox"/> Left on property
_____	_____	_____	<input type="checkbox"/> Sawed up & left

I represent to the Cooperative that I have full authority to grant permission as outlined above and agree to hold the Cooperative harmless in the event that the Cooperative is damaged as a result of my not having full authority as represented.

Date: _____**Signed:** _____

If submitting by email, please type your legal name in place of your signature above.

REMARKS:

Section Number: _____

May we do as this tree permit says so we can give you and your neighbors the best possible continuity of service?

Please sign and return to the Cooperative. THANK YOU.

REC Representative: _____