



## **General Terms of Application for Service**

The undersigned, (hereinafter “Applicant”) hereby applies for membership in and agrees to purchase electric energy from East-Central Iowa Rural Electric Cooperative (hereinafter “Cooperative”), upon the following terms and conditions:

1. The Applicant shall, when electric energy becomes available, purchase from the Cooperative all electric energy used on the premises described below and will pay therefore monthly at rates which will be fixed by the Board of Directors of the Cooperative. The Applicant will pay not less than the minimum charge for electric service, which may from time to time be fixed by the Board of Directors, regardless of the number of kilowatt-hours consumed.
2. The Applicant’s premises shall be wired in accordance with wiring specifications approved by the Cooperative. All service lines, meters, switches, and other materials and appliances constructed or installed by the Cooperative, except so much thereof as shall be purchased by the Applicant, shall remain the property of the Cooperative, and the Cooperative shall have the right and privilege to enter upon the Applicant’s premises to repair, service, and, upon the discontinuance of service, to remove the same.
3. The Applicant will comply with and be bound by the provisions of the Articles of Incorporation and Bylaws of the Cooperative, and such rules and regulations as may, from time to time, be adopted by the Cooperative.
4. The Applicant hereby grants the Cooperative an easement for all rights-of-way, which may reasonably be necessary for the Cooperative to construct, operate, and maintain facilities to provide service to the Applicant.
5. A portion of the monthly amount paid by the Member-Consumer to the Cooperative shall be applied to the cost of a subscription to the Cooperative’s newsletter.
6. The Applicant shall be subject to a credit check upon request for service. Upon request by the Applicant, a copy of the credit check information shall be provided to the Applicant.
7. Acceptance of this application, and the furnishing of electric energy by the Cooperative to the Applicant, shall constitute an acceptance of the above offer to purchase electric energy, and the contract between the Applicant and the Cooperative shall continue in force until such time as the Cooperative no longer provides electric utility service to the Member-Consumer.



## 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](http://www.ecirec.coop)

## Start Electric Service

### Property Owner Information

Are you starting service for a home or business?

Home       Business

How would you like ECI REC to send your membership information?

Mail       Email

Would you like to sign up for AutoPay via bank draft?

Yes       No

Members can also go paperless and pay bills with a credit card using SmartHub, a free online payment platform trusted by electric cooperatives around the country.

### For Residential Homes

#### Primary Account Holder Name

\_\_\_\_\_

First	Middle Initial	Last
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Cell Phone: \_\_\_\_\_ Landline: \_\_\_\_\_

Email Address: \_\_\_\_\_

Preferred Contact Method:  Email  Phone

#### Secondary Account Holder Name

Adding your spouse or another individual as a secondary account holder allows either person to be authorized to request information or make any changes on your account.

\_\_\_\_\_

First	Middle Initial	Last
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Cell Phone: \_\_\_\_\_ Landline: \_\_\_\_\_

#### Address of Service Location

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Mailing Address (if not the same as service location)**

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

**Effective Date of Service**

MM/DD/YYYY: \_\_\_\_\_ Time of Day: \_\_\_\_\_

**For Businesses / Commercial**

**Primary Account Holder Name**

\_\_\_\_\_

First	Middle Initial	Last
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Cell Phone: \_\_\_\_\_ Landline: \_\_\_\_\_

Email Address: \_\_\_\_\_

Preferred Contact Method:  Email  Phone

**Organization Name**

\_\_\_\_\_

**Address of Service Location**

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

**Mailing Address (if not the same as service location)**

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

**Effective Date of Service:**

MM/DD/YYYY: \_\_\_\_\_ Time of Day: \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Next Step**

*Filling out this form is the first step to receiving electric service from East-Central Iowa Rural Electric Cooperative. An ECI REC customer service rep will be in touch via phone to finish the process, including acquiring Social Security or Tax ID number(s). **Please indicate a time you are typically available between 7:30 a.m. and 4:00 p.m., Monday through Friday:** \_\_\_\_\_*