Inside Passage Electric Cooperative, Inc.
P.O. Box 210149 Auke Bay, Alaska 99821 (907) 789-3196 FAX #790-8517

## RESIDENTIAL APPLICATION

LEGAL NAME			Date of Birth		SS Number				
CO-APPLICANT:			DOB:		SS #	SS#			
Mailing	g Address		City	S	tate	Zip Code_			
Physica	al Address	· · · · · · · · · · · · · · · · · · ·	Email a	address:					
Best Phone # Cell			☐ Home ☐ Work ☐ Message Alternate Phone #				ОС □Н □W □М		
Alternate Phone #			_ □C □H □W □M Alternate Phone #			ОС ПН ПW ПМ			
People 1	living at this location	n:							
Name: _		Age	e:	Social Sec	curity #:			_	
Name: _		Age	e:	Social Sec	curity #:			_	
Name: _		Age	e:	Social Sec	curity #:			_	
Name: _		Age	e:	Social Sec	curity #:				
<ul><li>(1)</li><li>(2)</li><li>(3)</li><li>(4)</li></ul>	To receive from the Cooperative and purchase and pay for all electric service to be purchased for use at premises owned, leased as lessor or lessee, occupied or used by the Applicant, where such service is available (in the case of joint applicants, both applicants understand that the full amount of any sum due to the Cooperative may be collected from either applicant);  To be bound by and to comply with all applicable laws and regulations, the Cooperative's articles of incorporation, bylaws, tariff, board resolutions and policies, both as they now exist or as they may hereafter be adopted, repealed, amended or supplemented;  Upon request of the Cooperative, to grant to the Cooperative one or more right-of-way easements for extending and furnishing service to the Applicant/s or any other Cooperative member/s or for any other need of the Cooperative in constructing, operating and maintaining its electric system;  I have filled out this application form accurately.								
Applic	ant		Date	Co-Applicant (i	if applical	ole)	Date		
		<u>TO B</u>	E FILLED O	OUT BY OPERATO	<u>OR</u>				
Acct#_		Meter #		Manufactu	ırer				
In Read	·	In Read Date		Demand (yes / no)_		Multiplier			
Work D	Oone by	Route	Stop	Connect fee \$	\$	Deposit \$_			