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 # _____

Mailing Address_____City_____State_____Zip Code_____

Physical Address_____ Email address: _____

Best Phone # _____ ☐Cell ☐ Home ☐ Work ☐ Message Alternate Phone # _____ ☐C ☐H ☐W ☐M

Alternate Phone #_____ ☐C ☐H ☐W ☐M Alternate Phone #_____ ☐C ☐H ☐W ☐M

Alaska Airlines Mileage Plan Number_____ Name on account_____

People living at this location:

Name: _____ Age: _____ Social Security #: _____

Name: _____ Age: _____ Social Security #: _____

Name: _____ Age: _____ Social Security #: _____

Name: _____ Age: _____ Social Security #: _____

I/WE, the undersigned applicant/s, hereby request/s membership in Inside Passage Electric Cooperative, Inc., and to receive electric service, and for that purpose agree/s as follow:

(1) 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);

(2) 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bylaws, tariff, board resolutions and policies, both as they now exist or as they may hereafter be adopted, repealed, amended or supplemented;

(3) 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;

(4) I have filled out this application form accurately.

_____ _____ _____ _____

Applicant Date Co-Applicant (if applicable) Date

TO BE FILLED OUT BY OPERATOR

Acct # _____ Meter #_____ Manufacturer _____

In Read _____ In Read Date _____ Demand (yes / no)_____ Multiplier _____

Work Done by _____ Route_____Stop _____ Connect fee $_____ Deposit $_____