



Guthrie County REC

A Touchstone Energy® Cooperative 

GUTHRIE COUNTY RURAL ELECTRIC COOPERATIVE, INC.

GUTHRIE CENTER, IOWA

Application for Membership and Electric Service

The undersigned (hereinafter known as "applicant") hereby applies for membership in and agrees to purchase electric energy from the Guthrie County Rural Electric Cooperative Association upon the following terms and conditions:

1. A deposit will be required from all members. The deposit will be based upon the highest monthly kilowatt-hour usage in the previous 12 months. A credit reference in lieu of a deposit will be accepted if such reference shows 11 on-time payments out of the previous 12- month period from your last electric provider. (New hook up – no previous usage will be \$120 deposit)
2. The applicant will, when electric energy becomes available and the meter installed, purchase from the cooperative all electric energy used on the premises described below and will pay therefore monthly rates which shall be fixed by the board of directors.
3. The applicant will cause his premises to be wired in accordance with wiring specifications approved by the cooperative.
4. The applicant will comply with and be bound by the provisions of the charter and by-laws of the cooperative, of which said applicant will be a member, and such rules and regulations as may from time to time, be adopted by the cooperative.

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 continue from the date service is made available by the cooperative given by either party to the other. **(Please print.)**

I certify that this application is true and correct to the best of my knowledge.

Applicant's Signature _____ **Date** _____

Co-Applicant's Signature _____ **Date** _____

Applicant's Full Name _____

Social Security Number _____ Driver's License Number _____

Present Employer _____ Employer's Address _____

Home Phone _____ Mobile Phone _____ Work Phone _____

Spouse's or Co-Applicant's Full Name _____

Social Security Number _____ Driver's License Number _____

Present Employer _____ Employer's Address _____

Home Phone _____ Mobile Phone _____ Work Phone _____

Billing Address _____

Email Address _____ Occupants over the age of 18 _____

Service Address _____

Transfer Date _____

If renting, please provide landlord information below:

Name _____ Phone Number _____

Address _____