

ADAMS RURAL ELECTRIC COOPERATIVE, INC.

SERVICE APPLICATION

The undersigned, hereinafter called the "Applicant", hereby applies for membership in and agrees to purchase electric energy from Adams Rural Electric Cooperative, Inc. hereinafter called the "Cooperative" upon the following terms and conditions.

- The Applicant will purchase all the electric energy used on the premise described below, and will pay the monthly rates of the Cooperative. The Applicant will pay at least the minimum monthly charge per the current rate schedule.
The Applicant will provide a valid right of way easement, up to forty (40) feet wide, at no cost to the Cooperative, allowing the Cooperative access to serve the Applicant and other members. The Cooperative shall be granted the right to perform necessary maintenance or upgrading to power lines or right of way and allowed access for meter reading purposes.
The Applicant will cause his service location to be wired in accordance with approved wiring specifications. The Cooperative shall not be responsible for the wiring of the Premises and any appliance or other apparatus connected thereto.
The Applicant will comply with and be bound by the provisions of the Articles of Incorporation and Code of Regulations of the Cooperative, and all amendments and additions thereto.

This application shall constitute an agreement between the Applicant and the Cooperative, and shall continue in force until cancelled by either party.

"This institution is an equal opportunity provider and employer."

Please provide all the information below, sign your name before a notary and return to our office along with any necessary Security Deposit and/or Reconnect fees; and a copy of your Photo I.D.

Applicants Signature (Must sign before a Notary Public, See back of form) Social Security Number/FIN
Please Print Name or D.B.A. Phone Number Date of Birth
Service Address Billing Address
City/State/Zip Code City/State/Zip Code
Employer E-mail Address

For Office Use Only
Account Number Member Number Deposit Required\* Amount
Verified Photo ID Drivers License Number

Cooperative Employee Date

**Complete and sign Service Application before a Notary Public and return along with any necessary Security Deposit and/or Reconnect fees; and a copy of your Photo I.D.; to: Adams Rural Electric Cooperative, Inc., P.O. Box 247, West Union, OH 45693.**

STATE OF \_\_\_\_\_ )  
 )  
COUNTY OF \_\_\_\_\_ )

SS

(Notary Seal)

BE IT REMEMBERED, that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ before me, the subscriber, a

Notary Public in and for said County, personally came \_\_\_\_\_,  
Service Applicant, who has satisfactorily identified him/herself as the signer of the above referenced document;  
and acknowledged that the signing of the same to be his/her voluntary act and deed.

WITNESS my hand and official seal on the day and year last aforesaid.

\_\_\_\_\_  
(Notary Public) Commission Expires: \_\_\_\_\_  
(Date)

This instrument was prepared by Adams Rural Electric Cooperative, Inc.