



PO Box 539
1002 E Main
Stigler, OK 74462
918-967-4614

Toll Free 1-800-328-2368

PO Box 587
1800 KOA/Power Drive
Sallisaw, OK 74955
918-775-2211

Membership Application for Electric Service

A membership application signed by the applicant shall constitute membership if this application is accepted by the Cooperative.

The undersigned (hereinafter called the "Applicant") hereby applies for membership, and agrees to purchase electric energy from Cookson Hills Electric Cooperative, Inc. (hereinafter called "Cooperative"), upon the following terms and conditions, unless otherwise altered, amended or changed by separate special contract, which said special contract shall be controlling in case of conflict with any provision hereof.

1. The Applicant will cause the improvements and facilities on said premises to be wired in accordance with wiring standards and specifications established by the city, town, and state safety codes, and in accordance with the most recent edition of the National Electric Safety Codes and National Electric Code. Applicant further agrees to cause such wiring to be inspected as required by any of the aforesaid codes or agencies, and will pay such inspection fees as are lawfully levied by the inspecting agency, and when such wiring is approved by the inspecting agencies concerned, Applicant will accept electrical service from the Cooperative.

2. The acceptance of this application by the Cooperative, as hereinafter set out, will obligate the Cooperative to supply electrical service to Applicant, if electrical service is already installed and available at Applicant's premises. Thereafter such service shall continue until written notice of desire to discontinue service is given by either party to the other. After the discontinuance of service as aforesaid, or upon the discontinuance of service by the applicant without compliance with the aforesaid, and where the Applicant has been admitted to membership, such membership shall terminate.

3. Applicant will comply with, and be bound by the provision of the Articles of Incorporation, Bylaws of the Cooperative, Terms and Conditions of Service, and such Rules and Regulations as may from time to time be adopted by the Board of Trustees of the Cooperative or other authority having to do therewith, which said Articles of Incorporation, Bylaws, Rules and Regulations, and Terms and Conditions of Service between the parties hereto, are incorporated herein by reference, and made a part hereof, including all lawful amendments or changes that may be affected.

It is further understood by and between the parties that all equipment, supplies, wiring, and other electrical facilities installed by the Cooperative upon Applicant's premises pursuant to this agreement, shall be and remain the personal property of the Cooperative, and Applicant hereby specifically authorizes the Cooperative to remove all of its said materials, supplies, equipment, wiring, and electrical facilities upon the termination of this agreement or upon the discontinuance of service.

4. Applicant agrees and understands that in the event Applicant fails to pay the monthly bill (or such other period as the Cooperative may be billing) for electric and other services rendered by the Cooperative, within 10 days from the due date, the Cooperative may, after a notice in writing is mailed or delivered to Applicant's residence (or place of business, if this is a business service), as provided by the Terms and Conditions of Service, and/or Bylaws of the Cooperative, terminate electric service to Applicant, and Applicant expressly releases Cooperative from any liability or damages incurred by Applicant as a result of such termination.

5. The Applicant, by signing a membership application and becoming a member, assumes no liability or responsibility for any debts or liabilities of the Cooperative, and it is expressly understood that under the law, the Applicant's private property is exempt from execution for any such debts or liabilities. Further, the Applicant hereby grants right-of-way easements and access to the Cooperative on Applicant's property upon request by the Cooperative to construct, expand, extend, operate and maintain its system as required by law and regulations governing the same. Applicant further hereby grants unto the Cooperative the right to maintain any right-of-way and keep same free and clear from all obstructions, which may include, but not be limited to, manual cutting of trees, shrubs, foliage and all other forms of obstructions as well as chemical control thereof.

6. The Applicant will, when electric service becomes available, pay therefore in monthly increments, at rates approved by the Cooperative's Board of Trustees. Rates may be lawfully altered, amended or changed by the Cooperative's Board of Trustees. Applicant hereby agrees that \$3.48 of the amount paid for electricity each year is for a subscription to **Oklahoma Living** magazine, a monthly publication for the members of Oklahoma's Rural Electric Cooperatives. This charge is to apply to the Membership Account only.

Capital Credit # _____

Billing Cycle 1 2 3 4 5

Account # _____

The Applicant herewith pays to the Cooperative, the sum of \$ _____ of which \$ _____ shall constitute a deposit and \$25.00 shall constitute a connect fee. If Applicant has good credit then the deposit will be waived. The deposit may be applied by the Cooperative to the payment of any account which shall remain unpaid by the Applicant. All the above fees will be refunded to Applicant if Cooperative is unable to supply electrical service to Applicant's premises described herein.

Account Name _____ Co-Applicant _____

Home Phone No. _____

Mailing Address _____

Work Phone No. _____

City/State/Zip _____

Cell Phone No. _____

911 Address (if different than above)

911 Address _____

E-mail Address _____

City/State/Zip _____

Map Location _____

Meter Number _____

[] Tenant [] Property Owner

Property Owner's Name (if different from above) _____

Have you ever received service from Cookson Hill's Electric Co-op?

Yes [] No []

If yes: Date Received _____

Name on Account _____

If Business, Federal I.D. # _____

Residential Applicants please complete this section also:

Applicant Social Security No. _____

Co-Applicant Social Security No. _____

Applicant Drivers License No. _____

Co-Applicant Drivers License No. _____

Applicant Birth Date _____

Co-Applicant Birth Date _____

Marital Status: [] Single [] Married [] Divorced

[] Widow / Widower [] Other []

Maiden Name _____

If divorced, name of ex-spouse _____

Name, Address, and Telephone number of two of your nearest relatives not living with you.

Name _____

Name _____

Address _____

Address _____

City/State/Zip _____

City/State/Zip _____

Telephone _____

Telephone _____

Employer's Name and Address _____

Co-Applicant Employer's Name and Address _____

If no employment, give source of income _____

Cookson Hills is required by lenders to identify and document as accurately as possible the racial/ethnic data on the eligible population in our service area. We would appreciate your checking the appropriate group listed below. The information you provide will be used only for Federal Government Reporting purposes. Should you have any questions, you may contact the Cookson Hills Manager or a Member Services Representative at 918-967-4614 or 1-800-328-2368.

Racial / Ethnic Group:

APPLICANT CO-APPLICANT

APPLICANT CO-APPLICANT

a. White (not of Hispanic Origin)

[] []

d. Asian or Pacific Islander

[] []

b. Black (not of Hispanic Origin)

[] []

e. Hispanic

[] []

c. American Indian or Alaskan Native

[] []

f. Other _____

[] []

Meter Disconnection/Seal Removal Statement

I, the undersigned, do hereby acknowledge and understand that federal law prohibits me from removing a meter seal or disconnecting any Cookson Hills Electric Cooperative meter, survey or control device. Furthermore, I understand that failure to comply with this may be considered meter tampering, a crime punishable by fine and/or imprisonment. **The minimum to reconnect such a device is \$25.00.**

Please initial the following services in which you wish to participate:

[] Monthly Fire Department Billing

[] Automatic Bank Draft

[] Security Lights

[] Release of Information to 911

[] Automatic Credit Card Draft

To verify the amount required for a security deposit and to verify identity, the Applicant and/or Spouse/Co-Applicant do hereby authorize the Cooperative to run reports/identity checks, which requires the disclosure of Applicant's and/or Spouse's/Co-Applicant's social security number. I have authority to sign this agreement on behalf of my Spouse and/or Co-Applicant.

Applicant _____

Co-Applicant _____

Witness _____

Dated _____, 20 _____

The above application for membership accepted this _____ Day of _____, 20 _____

By _____ Title _____

Proof of Identification Form

STATE OF _____)
) ss.
COUNTY OF _____)

Subscribed and sworn to before me this _____ day of _____, 20____.

My Commission No. is: _____

This institution is an equal opportunity provider and employer