




Chariton Valley Electric Cooperative, Inc.

Your Touchstone Energy® Cooperative 

Application for Membership/Electric Service

Applicant certifies that the one box marked is the predominant use of electricity:

Household Commercial Other: _____

Start Service Date: _____ Do you own or rent the property? Own Rent

If renting, please list property owner's name: _____

Property owner's phone number: _____

Operation Round Up: Opt-In Opt-Out

PRIMARY APPLICANT/ORGANIZATION INFORMATION:

Chariton Valley Electric Cooperative requires information and signature(s) for the primary applicant, spouse/co-applicant and any other adults residing at the premise. The name(s) listed on your account should be exactly as it appears on your Social Security Card (or equivalent documentation.)

Name (First, Middle, Last) or Business or Organization Name: _____

Physical Address of Service: _____ City, State, ZIP: _____

Mailing Address: _____ City, State, ZIP: _____

Primary Phone: _____ Additional Phone(s): _____

E-mail: _____

Social Security Number/Federal TaxID: _____ Driver License #: _____ Date of Birth: _____

Employer: _____ Phone Number: _____

Nearest Relative: _____ Phone Number: _____

Applicant Signature: _____ Print Name: _____
(If signing for an organization, must be an authorized signer)

Date: _____

SPOUSE/CO-APPLICANT INFORMATION:

Name: (First, Middle, Last): _____

Primary Phone: _____ Additional Phone(s): _____

E-mail: _____

Social Security Number: _____ Driver License #: _____ Date of Birth: _____

Employer: _____ Phone Number: _____

Nearest Relative: _____ Phone Number: _____

Applicant Signature: _____ Print Name: _____

Date: _____

ANY OTHER ADULT(S) RESIDING AT THE PREMISE:

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

As a participant in the federal programs, through the Rural Utility Services, Chariton Valley Electric Cooperative, Inc. is required to identify and document as accurately as possible the racial/ethnic data on the eligible population on our service area. We would appreciate your checking of the appropriate group listed below.

Please note, your response is optional. The information you provide will be used only for Federal Government Reporting purposes.

RACIAL/ETHNIC GROUP:

- White (not of Hispanic Origin)
- Black or African American (not of Hispanic Origin)
- Hispanic or Latino
- American Indian
- Asian
- Other _____

IN CONSIDERATION OF THE MUTUAL PROMISES SET FORTH IN THE AGREEMENT, COOPERATIVE AND MEMBER HEREBY AGREES AS FOLLOWS:

1. The Cooperative agrees to furnish to the Member in accord with the Cooperative’s rules and regulations, and the Member agrees to purchase from the Cooperative and pay for, all electric energy used by the Member at the service address shown above or any other address for which the member requests service. Except for such energy that the Member may generate utilizing the Member’s own facilities pursuant to applicable law. Member agrees to pay the Cooperative monthly for such electric energy and associated services pursuant to such rates, terms, rules and regulations as may be established from time to time by the Cooperative.
2. All service lines supplying member with electric energy, and all meters, switches and other appliances and equipment constructed or installed by the Cooperative in, over, or under the property of the Member shall remain the property of the Cooperative. The Cooperative shall have an easement and the right of ingress and egress over the Member’s property for the purpose of constructing, operating and maintaining the Cooperative’s lines and equipment, including the right to cut, spray, trim or remove trees, shrubbery, or other obstacles necessary to operate and protect the Cooperative’s lines and facilities.
3. The Cooperative shall use reasonable diligence to provide a constant and uninterrupted supply of electric energy to Member, but if such supply shall fail or be interrupted, or become defective through act of God, or the public enemy, or by accident, strikes, labor troubles, or by action of the elements, or inability to secure rights-of-way, or other permits needed, or for any other cause beyond the reasonable control of the Cooperative, the Cooperative shall not be liable therefore.
4. Member agrees to pay a deposit to the Cooperative to secure payment for electric energy to be provided by the Cooperative, pursuant to the Cooperative’s tariff, upon the Cooperative’s request. In the event Member is required to pay a deposit, the deposit will be refunded in accordance with the rules of the Iowa Utilities Board.
5. Member agrees to comply with and be bound by the Cooperative’s Articles of Incorporation, Bylaws, rules and regulations.
6. All Member wiring installed or modified on the Member’s premises at the location identified above shall conform to the requirements of the National Electric Code wiring specifications, and any future additions, modifications or alterations to said wiring shall conform to said requirements.
7. The Cooperative shall have the right, but not the obligation, to inspect all wiring on Member’s premises at any time. In the event such inspection indicates that wiring is not in accord with the Cooperative’s requirements, Member shall make all necessary changes within a period of time specified by the Cooperative. The Cooperative shall have the right to immediately disconnect service to the location in the event it determines that hazardous conditions exist.
8. Member hereby releases and holds the Cooperative harmless from any and all liability of every kind and nature for damage to property or injury or death to persons or animals which may result from defective wiring on Member’s premises.
9. This Agreement shall be subject to the approval of the Board of Directors of the Cooperative, and shall become effective upon such approval and shall remain in full force and effect until canceled by either party upon 30 days’ written notice to the other party.

FOR OFFICE USE ONLY:

Account#: _____

Deposit Amount: _____

LOC From: _____

Member#: _____

Rate Code: _____

Photo ID Rec'd: Yes No

Employee Signature: _____