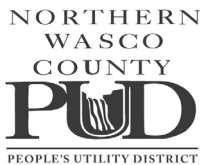


**STIPULATIONS & AGREEMENTS**

THE APPLICANT(S) HEREBY AGREE TO THE FOLLOWING CONDITIONS AND/OR STIPULATIONS

1. To be responsible for the prompt payment of all charges for energy as billed from the date service is started by the PUD on the basis of this application;
2. To give proper notification in advance of terminating service;
3. To be responsible for payment of all energy and service charges at this location until such time as proper advance notice of service termination has been received by the PUD;
4. To abide by all customer policies of the PUD;
5. To pay an account processing charge of \$25.00 (non-refundable);
6. That the applicants' credit history and ratings shall only be available to the customer; any person, firm, or corporation authorized by the customer; and any bona fide credit reporting agency;
7. To pay a deposit computed in accordance with the Customer Service Policy. Said deposit plus accrued interest will be applied to the unpaid balance upon termination of service with any remaining amount refunded. Said deposit will be credited to the customer's account after 12 consecutive billings if no more than two credit point are accrued;
8. Applicant shall provide clear access to their meter at all reasonable times for the purpose of reading and testing meters, repairing or replacing any of the District's equipment.



**APPLICATION FOR SERVICE**

Is anyone at the service address dependant on a Life Support System?

Yes  No

PLEASE PRINT

**OFFICE USE ONLY**

Acct. # : \_\_\_\_\_ Meter # \_\_\_\_\_  
 Account Processing Charge \$25.00 CSR \_\_\_\_\_  
 Deposit \$ \_\_\_\_\_ Cash Received \$ \_\_\_\_\_

Account Name \_\_\_\_\_ Today's Date \_\_\_\_\_  
Last First Middle

Spouse or Co-applicant \_\_\_\_\_

Co-signer \_\_\_\_\_ Account # \_\_\_\_\_

Service Address \_\_\_\_\_ Apt./Space # \_\_\_\_\_ Date Effective \_\_\_\_\_

Mailing Address \_\_\_\_\_ Telephone # \_\_\_\_\_

Own  Rent Name of Landlord \_\_\_\_\_

Will there be any dogs living on or regularly visiting the property?  Yes  No Qty \_\_\_\_\_ Breed \_\_\_\_\_

Are you now or have you ever been a PUD customer?  Yes  No

Previous Address \_\_\_\_\_ Move out Date \_\_\_\_\_

Personal Reference \_\_\_\_\_ Address \_\_\_\_\_ Phone# \_\_\_\_\_

Nearest Relative \_\_\_\_\_ Address \_\_\_\_\_ Phone# \_\_\_\_\_

Applicant's Employer \_\_\_\_\_ Co-Applicant's Employer \_\_\_\_\_

Drivers License /ID # \_\_\_\_\_ Drivers License /ID # \_\_\_\_\_

Social Security # \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_ Date of Birth \_\_\_\_\_

Signature \_\_\_\_\_ Signature \_\_\_\_\_

Co-Signature \_\_\_\_\_ Read Co-Signer Policy? (Initial) \_\_\_\_\_

*Signer has read, understands and accepts the stipulations and agreements listed on the reverse side.*