

Location _____

A PROPERTY OWNER'S

Account _____

APPLICATION FOR RECURRING MEMBERSHIP AND ELECTRIC SERVICE

The undersigned (hereinafter called the "Applicant") hereby applies for membership in and agrees to purchase electric energy from Callaway Electric Cooperative (hereinafter called the "Cooperative") upon the following terms and conditions:

- 1. The Applicant states that (he) (she) (they) is-are the owner of the premises receiving electric service, and the Applicant shall, if requested to do so, show proof of ownership by providing a copy of the deed or other record from the applicable county assessor or recorder.
- 2. The Applicant will pay to the Cooperative the sum of \$5.00, which, if accepted by the Cooperative, will constitute the Applicant's membership fee. The membership fee will be credited to the account on the final bill.
- 3. The Applicant will also pay to the Cooperative the sum of \$45.00 as a security for payment of electric service furnished Applicant. This amount will be credited to the account of the final bill and any portion of the \$45.00 remaining after full payment of final bill will be refunded to the Applicant. Pursuant to applicable Cooperative policy, the Applicant may be required to pay an additional deposit in addition to the aforementioned amount.
- 4. The Applicant will, when electric energy becomes available, purchase from the Cooperative all electric energy used on the premises described below and will pay therefore monthly at rates to be determined from time to time in accordance with the bylaws of the Cooperative, provided, however, that the Cooperative may limit the amount of electric energy to be of kilowatt hours consumed.
- 5. The Applicant certifies that ONE box marked is the predominant use of electricity. If energy purchased results in a sales tax liability due to use other than stated, the Applicant assumes responsibility for remitting such tax due directly to the Director, Missouri Department of Revenue.

GRAIN DRYING _____ IRRIGATION _____ FARM WELL _____ SEASONAL CABIN _____ RENTAL _____

OTHER SEASONAL USE (specify) _____

- 6. The Applicant shall cause his premises to be wired, and remain wired, in accordance with the National Electrical Code of the National Fire Protection Association then in force. The Applicant's premises where electric service is requested is located in _____ one-quarter of Section _____, Township _____ N, Range _____ W.
- 7. The Applicant will comply with and be bound by the provisions of the charter and bylaws of the Cooperative, and such rules and regulations as may from time to time be adopted by the Cooperative.
- 8. The Applicant, by paying a membership fee and becoming a member, assumes no personal liability or responsibility for any debts or liabilities of the Cooperative, and it is expressly understood that under the law his private property is exempt from execution of any such debts or liabilities.
- 9. I, as a condition of membership in the Cooperative, will, after consultation with the Cooperative, grant to Cooperative, electric distribution easements without charge on and through my property to provide service extensions to myself and other adjoining members, as well as to perform necessary maintenance and service upgrades.
- 10. I understand that I must notify the Cooperative of the approximate desired dates of connection and disconnection of electric services at my premises. Upon making any such request I understand that I will be required to provide proof of identity, including but not limited to, the last four (4) digits of my social security number.
- 11. I intend, and hereby direct the Cooperative, to keep this Application on file for a period of no more than thirty six months from the date of last disconnect. If directed to so do, the Cooperative will use the information contained in this Application to reconnect service to my premises identified above. It is my responsibility to update this Application as and when necessary.
- 12. I acknowledge that upon the Cooperative disconnecting electric service, as requested by me, any refunds of membership fees or deposits due me will not be paid, but instead will be kept on account by the Cooperative, in a separate account for me, without interest, until I request service reconnection. If such funds are insufficient to satisfy the membership fee or deposits required, I agree to pay any necessary and further amounts prior to reconnection of service. If after twenty-four (24) months I have not requested a reconnection of service, refunds will be made to me of the membership fee and deposit.
- 13. I agree that in the event it is necessary for the Cooperative to hire outside agencies, consultants or attorneys to pursue collection activities for amounts owed by me to the Cooperative I agree to reimburse the Cooperative for all costs of such outside agencies, consultants or attorneys, in addition to the original amount owed by the member. Prior to refunding any amounts owed me, including capital credits, I agree that the Cooperative shall be entitled to offset such refund against any amounts owed by me, including costs of collection efforts

The acceptance of this application by the Cooperative shall constitute an agreement between the Applicant and the Cooperative, and the undersigned agrees to purchase from the Cooperative all central station electric power and energy used on Applicant's premises and, upon Applicant's request, on any other premises which the Applicant may acquire, or to which Applicant may remove, or require additional service connection(s) to be made, for so long as premises are in an area served by the Cooperative and meets and-or conforms to existing Cooperative extension policies.

\$3.50 of the amount accruing to me each year as patronage capital is for a year's subscription to "Rural Missouri". In the event that the amount accruing to me is insufficient to cover the price of the subscription, I authorize the board of directors to pay for it out of the amounts paid by me for electric service.

Dated _____, 20____ Witness _____

Applicant _____ SSN _____

Applicant _____ SSN _____

Telephone _____ Type of Heat _____

Mailing Address _____