APPLICATION FOR ELECTRIC SERVICE

The undersigned: Individual, Partnership, Corporation, Un-includivision (hereinafter referred to as "Applicant") applies for el INC. (hereinafter referred to as "Cooperative") at Location N	lectric service from FEM	ELECTRIC ASSOCIATION,
Quarter of Section	Township Rar	nge
Quarter of Section, County of, Sta	te of South Dakota, now t	therefore, it is
AGREED AND UNDERSTOOD BY	THE APPLICANT	CAS FOLLOWS:
(a) That the Applicant shall purchase electric energy from the		
(b) That the Applicant and Co-Applicant must provide a copy is a business entity, the applicant must provide a copy of t	of driver's license or pho	oto identification. If the applicant
Identification Number (EIN).	ne entities certificate of g	ood standing and Employer
(c) That the Applicants will comply with and be bound by the general terms and conditions and all amendments thereto,		
(d) That by this application and request for electric service a j		
Co-Applicant (individual) or the Applicant (business) will		
(e) That all capital credits shall be owned and possessed by the		
of Applicant's death (individual), they shall be vested in the acknowledges that all unpaid capital credits shall be forfeit listed as one of the following: Partnership, Corporation, U	he name of the Applicant' ted to the Cooperative up	's surviving spouse. Applicant on dissolution of a membership
Sub-division.		
(f) That the Applicant (individual or business) is entitled to o acknowledges the other conditions of membership, such a for office as set forth in the Bylaws.		
(g) That Applicant agrees to provide Cooperative with all easements necessary in providing service to Applicant or other		
members of the Cooperative, and further agrees to any future tree trimming deemed necessary by Cooperative, and		
future changes to electric facilities, including but not limit		
(h) Applicant agrees to comply with the National Electric Saf		11 1 1
Applicant's responsibility and is not monitored or inspected		ses nevem that said comphanics is
(i) That membership in the Cooperative shall be terminated in		take service, has ceased to
purchase energy from the Cooperative, or fails to abide by		
(j) The Cooperative shall be authorized to subscribe from the		
for the official publication or publications of the Cooperat		
remains a member. In this respect, the Applicant shall reco		
Connections magazine and the subscription rate shall be p		
Cooperative.	and by the cooperative in	
Applicant (Please Print)	By (Signature)	
Mailing Address	Title	
Truming Trum 655		Dute
City, State, Zip Code	Phone 1	Phone 2
Individuals Only	Prosinosa Onlan	
Individuals Only:	Business Only:	
Co-Applicant Name:		
	EIN No	
Print Signature Applicant Co Applicant	Email Addussa.	
Applicant <u>Co-Applicant</u>	Email Address:	
Date of Birth		
Social Sec. No	Connect Fee:	

NOTE: This application must be completed, signed, and returned to our office, with proper documents and the connect fee, prior to receiving electric service.

Updated: 08/24/2023