



East Smoky Gas Co-op

Application for Membership and Natural Gas Service

Name: _____ Date: _____

Address: _____

Home Ph: _____ Work Ph: _____

Cell #: _____ Fax # or Email: _____

_____ ¼ Section _____ Township _____ Range _____ W _____ Meridian

Lot _____ Block _____ Subdivision _____

Plan Number _____

MD Rural Address _____

Notes: _____

How did you hear about us? Flyer Newspaper Other _____

Financing is now available for new domestic contracts!

Financing Requested? Yes _____ No _____

Upon acceptance of this application, the applicant must complete and sign a Customer Contract, outlining all conditions of service.

~ East Smoky Gas will complete this portion of the form ~

New Contract Cost \$ _____

Financing Admin Fee (*if applicable*) \$ _____

GST \$ _____

Total \$ _____

Amount to be paid in full at time of application \$ _____