

**Choctaw Electric Cooperative, Inc.**  
**PO Box 758, 1033 N 4250 Rd Hugo, OK 74743**  
**1-800-780-6486 Fax (580) 326-2492**  
**customerservice@choctawelectric.coop**

New Construction Service Yes \_\_\_\_\_ No \_\_\_\_\_  
Meter Number \_\_\_\_\_ Meter Reading \_\_\_\_\_  
Location (pole#) \_\_\_\_\_ \*Transfer Date \_\_\_\_\_

Membership Fee \$ 5.00  
Connect Fee (Non Refundable) \$ 25.00  
Deposit \$ \_\_\_\_\_  
Old Bill \$ \_\_\_\_\_  
Other Charges \$ \_\_\_\_\_  
Total \$ \_\_\_\_\_

\*Date Moving In (This is the closing date if purchasing home/ The date lease begins if renting)  
Please Note we will only go back to the end of the last billing period.

Do you want the existing security light(s)? Yes \_\_\_\_\_ No \_\_\_\_\_  
If no light exists, would you like one installed? Yes \_\_\_\_\_ No \_\_\_\_\_ (additional cost may occur)

**Application for Service and Membership**

**A photo I.D. is required.**      ( ) Single ( ) Married ( ) Divorced ( ) Widowed

**Applicant** \_\_\_\_\_ Birth Date \_\_\_\_\_ SSN # \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Service Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Place of Employment & Phone: \_\_\_\_\_

**Joint Applicant** \_\_\_\_\_ Birth Date \_\_\_\_\_ SSN # \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Place of Employment & Phone: \_\_\_\_\_

Do you own or rent this property? Own \_\_\_\_\_ Rent \_\_\_\_\_ Landlord's Name & Phone (if renting) \_\_\_\_\_

Is this your: Main residence? \_\_\_\_\_ Seasonal home? \_\_\_\_\_ Mobile home? \_\_\_\_\_ Other (please list) \_\_\_\_\_

Have you had service with Choctaw Electric before? \_\_\_\_\_ If so, under what name? \_\_\_\_\_

**Account Verification:** *Please check one choice and write answer below*

What is your mother's maiden name?   
What is your tax Id#?   
What is your password?

**Permit Contact Names:** 1 \_\_\_\_\_  
(Allowed to call in on account) 2 \_\_\_\_\_  
3 \_\_\_\_\_

**Answer** \_\_\_\_\_

I certify that all the information in this Application and any other required documentation is true and correct. In the event that any false or incorrect information is included, Applicant waives his/her/their right to service, and the Cooperative can discontinue service to the Applicant(s) without notice upon discovering such misstated or false information. I have been given a copy of the Choctaw Electric Bylaws.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Joint Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Solely to help us comply with government record keeping, reporting and other legal requirements. Your participation is strictly on a voluntary basis.

( ) White<sup>1</sup> ( ) African American<sup>2</sup> ( ) Hispanic<sup>3</sup> ( ) American Indian or Alaskan Native<sup>4</sup> ( ) Asian or Pacific Islander<sup>5</sup>

Permission is granted to Choctaw Electric Cooperative to obtain a credit report at no cost to the applicant. I understand that if such credit report indicates, a deposit will be required before CEC will provide electric service. I understand that the above information may be released to assigned agents of this cooperative involving collection procedure of any incurred debt.

Signature. \_\_\_\_\_ Date: \_\_\_\_\_

Joint Signature. \_\_\_\_\_ Date: \_\_\_\_\_

**To be filled out by CEC official only**

Credit Check Required Yes \_\_\_\_\_ No \_\_\_\_\_ Fees Paid \_\_\_\_\_ Fees Billed \_\_\_\_\_ Standard Billing \_\_\_\_\_ Prepaid Billing \_\_\_\_\_

CEC Representative \_\_\_\_\_ Date \_\_\_\_\_

Service Order # \_\_\_\_\_ Account # \_\_\_\_\_ Race Code \_\_\_\_\_ Billing Cycle \_\_\_\_\_ I.D. verified \_\_\_\_\_

**CHOCTAW ELECTRIC COOPERATIVE, INC.**

**Application for Joint or Individual Membership and Contract for Electric Service**

The undersigned, whether an individual or husband and wife (hereinafter called the "Applicant") hereby applies for membership in, and agrees to purchase electric energy from Choctaw Electric Cooperative, Inc. (hereinafter called the "Cooperative") upon the following terms and conditions:

**Membership**

- 1. The Applicant will pay the Cooperative the sum of \$5.00, which, if the Cooperative accepts this application, will constitute the Applicant's membership fee. This charge is to apply to the Membership Account only. Additionally, the Applicant will be charged a Service Connection Fee and if required, a deposit.
- 2. The Applicant will comply with and be bound by the provisions of the Articles of Incorporation, Bylaws of the Cooperative, and such rules and regulations that may from time-to-time be adopted by the Cooperative.
- 3. The Applicant, by paying the membership fee, assumes no personal liability or responsibility for any debts or liabilities of the Cooperative.
- 4. Applicant hereby agrees that \$3.84 of the amount paid for electricity each year is for a subscription to *Oklahoma Living* magazine, a monthly publication for the members of Oklahoma's Rural Electric Cooperatives.
- 5. The Applicant will cause the premises to be properly wired in accordance with all applicable electrical codes. The Cooperative may refuse to connect and may disconnect power to any service not meeting the codes.
- 6. Applicant hereby agrees that if the account is disconnected for non-payment and leaves an unpaid balance, the account may be turned over to the Cooperative's collection agency. The applicant agrees to be contacted by any phone number provided to the cooperative including a mobile phone number.

**Payment**

- 7. The Applicant will, when electric service becomes available, purchase from the Cooperative all the electric energy purchased for use 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.
- 8. The Applicant hereby assumes personal liability for any outstanding debts owed to the Cooperative by any person residing in the household where Applicant is requesting electrical service. Applicant hereby authorizes the Cooperative to transfer any and all outstanding balances held in the name of any household resident to the new account.
- 9. Applicant agrees that a 6.5% late fee will be added to the bill on all balances not paid by the due date. Unpaid bills become delinquent after the due date and the account may be subject to disconnect. If disconnected for non-payment, the past due bill must be paid before reconnecting and a \$50 reconnect fee will be added to the next bill. Failure to receive bills does not extend payment dates. Applicant also agrees that should service be terminated due to failure to pay monthly bill; the Cooperative is not to be held liable for any damages incurred as a result of such termination.

**Access to Premises and Grant of Easement**

10. Applicant, by signing below, does hereby grant and convey to the Cooperative, its successors and assigns, a right to enter and an easement on, over and upon the Applicant's real property for the purpose of construction, maintenance and operation of Cooperative's electric system for the benefit of the Applicant and/or other cooperative members. Applicant agrees that the Cooperative, in the course of operating, construction and maintaining its system, shall have the right to clear the easement of all brush, shrubs, and trees situated therein utilizing mechanical methods or herbicide treatment. Applicant grants access to Cooperative personnel and contractors for purpose of operating, upgrading, maintaining and constructing Cooperative's facilities, lines, poles and equipment, including clearing of all easements (utilizing mechanical methods or herbicide treatments) and reading and inspecting meters as needed.

**The Applicant(s) has/have carefully read the above application, acknowledge(s) that the Cooperative has made no promise or agreements aside from the provisions contained herein, and understand(s) that it constitutes a binding agreement when approved by the Cooperative as provided in its bylaws and policies. (To be signed in front a CEC representative in person.)**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Joint Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**OR to be signed and notarized if not filled out in person in front of a CEC representative.**

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**My commission expires:**

**Notary Public:**

\_\_\_\_\_

\_\_\_\_\_