

**PO BOX 69 WINTHROP, WA 98862
(509) 996-2228 (509) 996-2241 FAX**

APPLICATION FOR MEMBERSHIP

The undersigned (hereinafter called the Applicant) hereby applies for membership in and agrees to purchase electrical service from Okanogan County Electric Cooperative, Inc., (hereinafter called the Cooperative) upon the following terms and conditions.

1. The Applicant will pay to the Cooperative the sum of **\$5.00** which, if this application is accepted by the Cooperative, will constitute the Applicant's membership fee. A **\$25.00** account set-up fee will be charged to the first months billing.
2. All applicants are required to furnish a **\$250.00** deposit or a letter of good credit from the Applicant's most recent electric utility indicating a history of prompt payment. The manager may require a larger deposit on services that have a history of high usage. ***Deposits are required on all rentals unless the PROPERTY OWNER guarantees all charges in writing. For a Landlord to waive the deposit they must have membership in good standing with OCEC.*** Landlords of tenant owned properties will have access to billing information on those properties.
3. All deposits will be refunded upon discontinuance of the account service and payment of all charges due to the Cooperative are paid in full or upon continued prompt payment of all charges for a period of twelve (12) consecutive months with the exception of renters/tenants.
4. The Applicant will purchase from the Cooperative energy at rates to be determined accordance with the By-Laws of the Cooperative.
5. The Applicant will comply and be bound by the provisions of the Articles of Incorporation and By-Laws of the Cooperative and such policies as may from time to time be adopted by the Cooperative.
6. The Applicant, by paying a membership fee and holding a membership assumes no personal liability or responsibility for debts or liabilities of the Cooperative and it is expressly understood that under the law their private property is exempt from execution for any such debts or liabilities.

The acceptance of this application by the Cooperative will constitute an agreement between the Applicant and the Cooperative and the contract for energy service will continue in force until cancelled by at least thirty (30) days written notice given by either party to the other.

Applicant name(s) _____

Co-Applicant _____

Driver's License # _____ Birth date _____ Employer _____

Driver's License # _____ Birth date _____ Employer _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email: _____

Text Message for Outages: Yes No

Email: _____

E-Bill Statements: Yes No

Mailing Address: _____

PO Box/Street Address

City

State

Zip

Property Location: _____

I authorize the sharing of this information with the Cooperative subsidiary Okanogan County Energy, Inc.
A copy of the current Bylaws of the Okanogan County Electric Cooperative, Inc., will be mailed upon membership acceptance.

Applicant Signature _____

Co-Applicant Signature _____

The above application for membership and agreement for energy service is accepted this _____ day of _____ 20_____.

Signature of Employee _____