HOUSTON COUNTY ELECTRIC COOPERATIVE, INC. **EXISTING MEMBER-NON-COMMERCIAL APPLICATION**

NOTE: THIS APPLICATION CANNOT BE USED FOR SERVICES REQUIRING HCEC TO BUILD NEW ELECTRIC LINE.

PLEASE READ BEFORE SIGNING:

THE UNDERSIGNED IS A CURRENT MEMBER OF HOUSTON COUNTY ELECTRIC COOPERATIVE, INC. BY SIGNING THE MEMBER FURTHER CERTIFIES THE CORRECTNESS OF ALL DATA SUPPLIED ON THIS APPLICATION FOR ELECTRIC SERVICE. MEMBER IS SUBJECT TO THE FOLLOWING CONDITIONS:

- 1. MEMBER AGREES TO COMPLY WITH AND BE BOUND BY THE PROVISIONS OF ALL THE ARTICLES OF INCORPORATION, TARIFF, AND BY-LAWS OF THIS COOPERATIVE OF WHICH HE WILL BE A MEMBER, AND SUCH RULES AND REGULATIONS AS MAY, FROM TIME TO TIME, BE ADOPTED BY THE COOPERATIVE, AS ESTABLISHED BY THE PUBLIC UTILITY COMMISSION OF TEXAS.
- 2. MEMBER AUTHORIZES HCEC TO REQUEST A CREDIT REPORT FROM ONLINE UTILITY EXCHANGE AND AGREES TO PAY COOPERATIVE ALL APPLICABLE FEES AND A DEPOSIT BASED ON A CREDIT SCORE (IF REQUIRED).
- 3. MEMBER AGREES TO PROVIDE VALID PICTURE ID.

VOLUNTARY RACIAL/ETHNIC GROUP (CIRCLE ONE):

4. APPLICANTS MUST ESTABLISH ELECTRIC SERVICE WITHIN THIRTY (30) DAYS OF CONSTRUCTION COMPLETION, OR THE BASE CHARGE WILL APPLY FROM THAT DATE

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MEMBER AND SPOUSE/CO-MEM	IBER MUST SIGN AND DATE BELOW:			
MEMBER SIGNATURE:	ME	MBER SIGNATURE	:	
DATE:	DA1	ΓΕ:		
	NEW SERVICE INFO	RMATION:		
Is there a meter at this locat	ion? If so, please provide the meter	number:		
If not, what is the 911 addres	s of new service and type of service	e?		
PHYSICAL (911) ADDRESS:				
PLEASE CIRCLE ONE:	रा	CITY		ZIP
PRIMARY RESIDENCE/MOBILE HOME	CAMP/LAKE HOUSE/TRAVEL TRAILER	RENT HOUSE	OTHER: WELL, GATE, SHOP/BARN/S	TORAGE UNIT
NOTE: THIS APPLICATI	ION CANNOT BE USED FOR SERVICES	REQUIRING HC	EC TO BUILD NEW ELECTRIC L	INE.
CHECK HERE IF THE BILL	LING INFORMATION FOR YOUR NE	W SERVICE W	ILL REMAIN THE SAME AS Y	OUR
CURRENT ACCOUNT UNI	DER THE NAME OF:			
	FIRST	MIDD	LE OR MAIDEN	LAST
ADDITIONAL INFORMATIO	N ONLY REQUIRED IF BILLING CON	ITACT HAS CHA	ANGED:	
MAILING ADDRESS:				
PRIMARY PHONE #:	STATE ZIP SECONDARY PHONE #*			
CELL OR LANDLINE (CIRCLE ONE FOR THE AE	BOVE) CELL OF	SECONDARY PHONE #: CELL OR LANDLINE (CIRCLE ONE FOR THE ABOVE)		
EMAIL ADDRESS:	consent that you will receive future contact that delivers prerecorded	or auto-dialed messages by	or on behalf of HCFC. This notice is intended to comply i	with the Telephone
Consumer Protection Act (TCPA) of 1991 and Feder	consent that you will receive future contact that delivers prerecorded ral Communications Commission regulations. I understand that I may	revoke this authorization at	any time by notifying HCEC in writing, by telephone, em	ail or in person.
			<u>STATEMEN</u>	<u>1T</u>
			(OFFICE USE ONL)	.Y)
	mi.ri.		PREPAID ACCOUNT	
			() DEPOSIT:	
A Touchstone	e Energy® Cooperative	()) BAL. ON PREPAID ACCT:	
The information requested under racial ethnic group is us monitoring, and reporting on its equal opportunity and all and the state of t	ed by Houston County Electric for the purpose of collecting, analyzing, ffirmative action efforts, including reports filed with the federal gov- tion 504 of the rehabilitation Act of 1973, and the Age Discrimination	` ') BAL. FROM PREV. ACCT:	
ernment under Title VI of the CIVII Rights Act of 1964, Sec Act of 1975	LIUIT 204 OF THE FENABIIITATION ACT OF 1975, AND THE AGE DISCRIMINATION	(OPTI OUTDOOR LIGHT:	

OTHER (PLEASE DESCRIBE): __

() BAL. FROM PREV. ACCT: _____ () OPTL. OUTDOOR LIGHT: _____

TOTAL: __