APPLICATION FOR SERVICE



PREPAY ACCOUNT

Applicant Name (Last) (First)		(Middle)		
Business Name (If applicable, membership will be put in business name)			Employer Identification Number	
Spouse/Co-Applicant Name (Last) (First) (Middl		(Middle)	OFFICE USE ONLY	
Service Address (Where the meter is located)	(City)	(Zip)	Membership Numb	er:
Billing Address (If different from above)	(City)	(Zip)	Location:	
Applicant's Cell Phone	Co-Applicant's Cell Phone		Cycle:	
Best Contact Number (If different from above)	Best Contact Number(If different from above)		Meter Number:	
Applicant's Social Security Number	Co-Applicant's Social Security Number		Service Order:	
Applicant's Driver's License	Co-Applicant's Driver's License		Deposit Amount:	
Applicant's Employer	Co-Applicant's Employer		Rate:	District:
Email Address			Existing Ancillary Device: Yes or No	
Structure Type (eg. house, barn, pump)	Location: New Are you the property	Previously Served owner? Yes No	Date Meter Set:	
Does 'Applicant' qualify for tax exemption? (eg. factor) (eg. factor) (eg. factor) (Tax exempt documents must be presented.)	Work Order #: (If applicable)			
IMPORTANT SECURITY LIGHT INFORMATION If there is an existing security light(s) on the property, please initial one of the lines below:Yes, continue the security light(s) rental at this location. By signing below I agree to the terms, conditions, and fees associated with DREMC's security light contract.			Existing Security Light: Yes or No	
			Security Light Pole #:	
No, I do not want to continue the security light(s) at this location.			Туре:	
The undersigned hereby makes application for electric service at the above address and agrees to pay for said services as measured by the meter of Duck River Electric Membership Corporation (hereinafter called Distributor) according to the rate applicable. The applicant agrees to permit authorized agents of the Distributor free access to the premises of the member (by providing keys, access codes or allowing the installation of the Distributor's lock) for the purpose of inspecting, reading, repairing, maintaining (including cutting, trimming and control by chemical or other means the growth of trees and shrubbery), removing			Watt:	
			kWh:	
			Notes:	
or exchanging property of the Distributor and shall, without cha applicant for the transmission and distribution lines and lines for to keep the area under or above the Distributor's equipment, fa or deep-rooted vegetation.	Posted by:	Date:		

The Distributor shall have the right, but shall not be obliged, to inspect any installation before electric service is introduced, or at any later time; but such inspection or failure to inspect or reject shall not be regarded as an insurance against defects in installation, wiring or appliances, and shall not render Distributor liable or responsible for any loss or damages, resulting from defects in the installation, wiring or appliances, or from violation of the Distributor's bylaws, Rules and Regulations and Policies, or from accidents which may occur upon the premises of the member.

The applicant agrees to pay a membership/application fee of \$10.00 and any applicable deposit(s) or fees pursuant to the current Bylaws, Rules and Regulations and Policies of the Distributor. If for any reason the Distributor does not make electric service available to the above named person(s), any money paid on this membership/application shall be refunded.

The applicant agrees that this application, and any electric service rendered hereunder, is subject to the Bylaws, Rules and Regulations and Policies of the Distributor, copies of which are open for inspection at the office and on the website of the Distributor, and these Bylaws, Rules and Regulations and Policies are a part of this agreement.

The applicant agrees that a portion of the amount which accrues to the applicant each year will be applied toward the current subscription rate of The Tennessee Magazine, or such other official publication as may be selected by the Board of Directors.

The applicant consents that the Distributor can use the e-mail, address and phone number(s) associated with the account to communicate about account status, power outages, peak demand, energy efficiency, programs, services and events. Except as required for conducting satisfaction surveys and polling related to the Distributor's business, whether conducted by the Distributor or by its other partners and contractors representing the Distributor, the Distributor shall not share member information with any third party or cause such addresses to be used for unauthorized solicitation and communication.

The applicant(s) gives consent for the Distributor to perform a credit check on his/her individual credit performance through a reputable credit reporting agency to determine the applicability of the Distributor's security deposit policy and further agrees to pay the applicable \$5.00 fee per person charged by the Distributor for said credit check.

Yes No

Signature of Applicant

Signature of Co-Applicant

Date

Note: Both Applicant and Co-Applicant are responsible for all charges incurred as they relate to this electric service account.

WWW.DREMC.COM

SIGN UP FOR BANK DRAFT

Receive a one-time \$10 bill credit.*

*This offer excludes prepaid accounts. Member must participate in selected programs for a minimum of 12 months.

Bank Draft

A voided check must accompany this form to provide proper bank account coding.

Name on bank account (if different from member name)-

Routing Number

Bank Account Number_____

Bank Name_____ Bank Address ____

Signature_____

(If not local) Date ____

ADDITIONAL PROGRAMS & SERVICES

Please initial next to the programs and services you wish to participate in. An additional participation form may be required for some programs.

ALERTS & REMINDERS

I AGREE TO RECEIVE TEXTS AND/OR EMAIL MESSAGES AND REMINDERS RELATED TO BILLING DUE DATES, ENERGY USE, AND MORE.

PLEASE PROVIDE YOUR PHONE CARRIER TO **RECEIVE TEXT ALERTS/REMINDERS:**

(Name of phone carrier)

PROJECT HELP

I AGREE TO PARTICIPATE IN PROJECT HELP, CONTRIBUTING EACH MONTH TO HELP OTHERS WITH THEIR ENERGY BILLS AND UNDERSTAND THAT DONATIONS ARE DISTRIBUTED BY THE APPROVED ASSISTANCE AGENCIES TO THOSE WHO MEET QUALIFYING CRITERIA. STARTING WITH MY FIRST BILL, I WISH TO DONATE THE AMOUNT CIRCLED EACH MONTH ON MY BILL. \$1 \$5 \$10 \$25 OTHER \$

I REQUEST THAT THIS DONATION ASSIST MEMBERS IN THE COUNTY CIRCLED: BEDFORD / COFFEE / FRANKLIN / GILES / MARSHALL / MAURY / MOORE

ELECTRONIC BILLING

I AGREE TO OPT OUT OF TRADITIONAL PAPER BILLING AND RECEIVE MY MONTHLY ELECTRIC BILLING STATEMENT VIA ELECTRONIC MAIL.

MOBILE APP

DREMC'S MOBILE APP CAN BE USED TO MANAGE YOUR ACCOUNT. MEMBERS CAN MAKE PAYMENTS, SET ALERTS AND REMINDERS, VIEW ACCOUNT HISTORY, REPORT OUTAGES, AND MORE. IT'S A FREE DOWNLOAD.



SEARCH FOR DREMCmobile.





New Member Information



Learn about DREMC service policies, cooperative bylaws, programs, and more by visiting

www.dremc.com/new-member-information

