

## FORM TO USE FOR RECEIVING CREDIT REFERENCE

I, \_\_\_\_\_ (customer name) authorize \_\_\_\_\_  
(former utility) to release to Douglas Electric Cooperative, Inc., Armour SD 57313 the  
information to be used in determining if the electric service deposit will be returned.

I understand that if I do not provide this information my deposit of \$250.00 to Douglas Electric  
Cooperative will not be refunded until after two years of satisfactory credit record or until  
termination of service.

Signed: \_\_\_\_\_  
Customer

## INFORMATION TO BE PROVIDED BY FORMER UTILITY COMPANY

Length of Service _____ Years	_____ Months
Number of late payment charges in last 12 months:	_____
Number of shut off notices in last 12 months:	_____
Number of times disconnected for non-payment of bills:	_____
Was final bill paid:	_____

Signed by Former Utility: \_\_\_\_\_

Please return to Douglas Electric Cooperative, Inc.

27913 US Hwy 281

Armour SD 57313

(605) 724-2323

FAX: (605) 724-2972

E-MAIL: jenn@dougaselec.coop