

**APPLICATION FOR MEMBERSHIP AND SERVICE**

**Douglas Electric Cooperative, Inc.**

**27913 US Hwy 281**

**Armour SD 57313**

The undersigned (whether singular or plural, herein called "Applicant") hereby applies for membership in, and to receive electric service from, Douglas Electric Cooperative, Inc. (hereinafter called the "Cooperative"), and for that purpose agrees as follows:

1. To pay the Cooperative its established membership fee;
2. To receive and purchase from the Cooperative all central station electric service to be purchased for use at premises owned, leased as lessor or lessee, occupied or used by the Applicant at \_\_\_\_\_
3. To be bound by and to comply with the Cooperative's articles of incorporation, bylaws, consumer classifications, rates, charges and policies or service rules and regulations both as the same now exist or may hereafter be adopted, rescinded, amended or supplemented:
4. To allow access for the Cooperative to extend and furnish service to the Applicant or any other Cooperative member or for any other need of the Cooperative in constructing, operating, and maintaining its electrical systems; and
5. To subscribe to the Douglas Electric Cooperative Connections with such subscription costs of .50 cents per month to be deducted from funds as would any other operating expense of the Cooperative.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Applicant

**PLEASE FILL OUT INFORMATION ON BACK**

The above application for membership has been accepted this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
Douglas Electric Cooperative, Inc. by \_\_\_\_\_

**Date Collection Information**

**New Patrons**

As a participant in a Federal utilities financing program, the Douglas Electric Cooperative is required to identify and document as accurately as possible the racial/ethnic data on the eligible population in our service area. We would appreciate your checking the appropriate group listed below and returning this form to us within 2 weeks.

Please note your response is optional. The information you provide will be used only for FEDERAL GOVERNMENT REPORTING PURPOSES.

Should you have any questions, you may contact Jay Spaans, Manager Douglas Electric Cooperative, Inc. (605) 724-2323.

Thank you for your cooperation in this matter.

YOUR NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

RACIAL/ETHNIC GROUP:

- A. American Indian or Alaska Native \_\_\_\_\_
- B. Asian \_\_\_\_\_
- C. Black or African American \_\_\_\_\_
- D. Native Hawaiian or Other Pacific Islander \_\_\_\_\_
- E. White \_\_\_\_\_
- F. Hispanic or Latino \_\_\_\_\_
- G. Other \_\_\_\_\_

**Please return this form to:**

Douglas Electric Cooperative, Inc.  
27913 US Hwy 281  
Armour SD 57313

**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 by deposit of \$ \_\_\_\_\_ 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  
(605) 724-2972 - FAX