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16755 Finley Butte Rd / PO BOX 127
La Pine, OR 97739
(541) 536-2126 (800)722-7219 FAX (541) 536-7280
www.midstateelectric.coop
Email to: memberservice@mse.coop

CC#
Processed By/Date Office Use only

NEW MEMBER APPLICATION

Fill in all applicable fields, sign and present photo ID. If this form is not presented in our office, it must be notarized.

MEMBERSHIP TYPE (Please Check the appropriate box below)

Fill in Sections 1, 2, & 4 ONLY	<input type="checkbox"/> Single Person	<input type="checkbox"/> Joint (Marital Partners)	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Partnership			
Fill in Sections 3 & 4 ONLY	<input type="checkbox"/> LLC	<input type="checkbox"/> Corporation	<input type="checkbox"/> Special District	<input type="checkbox"/> Association	<input type="checkbox"/> Trust	<input type="checkbox"/> Estate	<input type="checkbox"/> Non-Profit Organization

SECTION 1

Please Print Legal Name Last Name _____ First Name _____ Middle _____

If Assumed Business Name: _____ (Requires Completed W-9)

List all other names used: _____

Billing/Mailing Address _____

Street address or PO BOX _____

City _____ State _____ Zip Code _____

Driver's License # _____ Issue State _____ Date of Birth: _____

Primary Phone: _____ (Number for us to contact)

Secondary Phone: _____

Email Address: _____

Social Security #: _____

Month Day Year

SECTION 2

SPOUSE INFORMATION – Required for Joint Membership

Please Print Legal Name Last Name _____ First Name _____ Middle _____

Driver's License # _____ Issue State _____ Social Security #: _____

Date of Birth: _____

In lieu of providing a marriage certificate, we as joint members signing this membership application hereby certify that we are legally married.

Month Day Year

SECTION 3

Organization Name _____ (Requires Completed W-9)

Billing/Mailing Address _____

Street address or PO BOX _____ Tax ID # (Also used for account authorization/verification) _____

City _____ State _____ Zip Code _____ Business Phone (Number for us to contact you) _____

Name of Firm Representative _____

(Individual Responsible for voting during elections) _____ Cellular Phone _____

SECTION 4

Service Address

Actual Physical location of property including address and road or street name _____

Connect Date ____ / ____ / ____ Allow 5 business days from date received in our office. Additional charges apply for same day requests.

APPLICATION MUST BE SIGNED ON RED LINE ON BACK PAGE BY ALL PERSONS TO BE VALID

The Applicant (s) whose name appears above and signature appears below, hereby applies for membership in and agrees to purchase electric energy from **MIDSTATE ELECTRIC COOPERATIVE, INC.**, PO Box 127, La Pine, Oregon, 97739 (hereinafter called the Cooperative) upon the following terms and conditions:

CC#

The application shall specify the premises on which electric energy obtained from the Cooperative would be used, application for membership shall be in writing, and shall be in such form as the Board of Directors of the Cooperative from time to time shall prescribe. Such application shall constitute an agreement by the applicant, if accepted for membership, to comply with and be bound by all laws and regulations, the Cooperative's Articles of Incorporation, bylaws, consumer classifications, rates, charges, and service rules and regulations of the Cooperative both as the same now exist or may hereafter be adopted, repealed, amended or supplemented and also an agreement to obtain from or through the Cooperative all electric energy used by or for that member on the premises specified in the application.

Upon acceptance for membership the applicant shall pay a nonrefundable membership fee of five dollars (\$5.00) which shall entitle the applicant to membership in the Cooperative.

Excerpts from Service Policy # 302. Read the full Policy and other information at www.midstateelectric.coop

- By signing this application, I give the Cooperative permission to run a credit check for purposes of deposit requirements. Members who do not meet the Cooperative credit requirements are required to pay a deposit.
- By providing Midstate Electric with your phone number, you are giving express written consent to call that phone number for Midstate Electric business purposes.
- Midstate Electric will attempt to provide satisfactory and uninterrupted electric service; but cannot and will not guarantee such service, and shall not be liable for injury, loss, or damage resulting from any failure or curtailment of electric service; nor shall failure or curtailment constitute a breach of contract. Whenever necessary, for the purpose of making repairs or improvements to its system, Midstate Electric shall have the right to temporarily suspend the delivery of electric energy; but in such cases, Midstate Electric will attempt to give reasonable notice, if circumstances permit, and attempt to schedule its activities to the member's convenience.
- Service may be terminated by the Cooperative at the request of applicant or in accordance with Policies, Rules or Regulations adopted by the Cooperative Board of Directors or in accordance with orders, directives or rules and regulations of governmental bodies.
- Midstate Electric shall be granted, at no cost and in writing suitable for recording, all rights-of-way and easements necessary to serve the member, or any other cooperative's member, overhead or underground, for the erection, maintenance, repair, replacement, removal, or use of all wires, poles, machinery, fixtures, or equipment needed to supply and deliver electric service to the member or any other member or for any other need of the cooperative in constructing, operating and maintaining its electric system. Midstate Electric, through its authorized employees and contractors, shall have access to its equipment at all times (this includes the removal of all obstacles including pets, that may constitute a hazard), for the purpose of reading meters, testing, repairing, or replacing any equipment which is the property of Midstate Electric. If such equipment is so located that locks or security devices must be operated to reach it, Midstate Electric shall be provided appropriate access. This may require the use of a Midstate Electric lock in conjunction with the member's security. Any changes to your equipment or fees and permits are the member's responsibility. Midstate may cut and trim trees and shrubbery on member's property to the extent necessary to keep them clear of Cooperative property.
- The member shall take all reasonable and proper precautions to prevent damage or theft to Midstate Electric's property and facilities on the member's premises. In the event that property of Midstate Electric is damaged, Midstate Electric may collect, from the responsible party or member responsible for account service, the cost of repairs or replacement.
- The account will be disconnected for power diversion, tampering with Midstate Electric's property or facilities, inaccessible meters or hazardous conditions. Additional charges must be paid and/or corrections made prior to reconnection.
- It is the goal of Midstate to provide reliable energy; however Midstate is not financially responsible for damage sustained to personal property as a result of power voltage fluctuations or power disruptions for which it is not negligent. We encourage you to obtain home owners or renters insurance that will protect your property in the event of power voltage fluctuations or power disruptions.
- Member agrees a yearly subscription to Ruralite Magazine is included in payments for electric service.

Applicant (s) agree that everything stated on the Membership Application is correct and true to the best of my (our) knowledge.

PLEASE ATTACH COPIES OF A GOVERNMENT ISSUED PHOTO ID FOR EACH PERSON

Applicant Signature on red line above _____ Date _____

Spouse Signature (Must sign if joint membership) _____ Date _____

State Of _____

State Of _____

County of _____

County of _____

This instrument was acknowledged before me on:

This instrument was acknowledged before me on:

(Date) _____ ,

(Date) _____ ,

by _____

by _____

(Name of applicant)

(Name of applicant)

My commission expires _____

My commission expires _____

Notary's Signature _____

Notary's Signature _____

