

DICKSON ELECTRIC SYSTEM

PO Box 627

Dickson, Tennessee 37056

Phone: (615) 446-9051 • Fax: (615) 446-7111

APPLICATION FOR ELECTRIC SERVICE

Please print or type

Name: _____

Phone #: () _____ - _____ Date: _____

Service Address: _____

Send Bill To: _____

Social Security Number: _____ - _____ - _____

Spouse's Name: _____

Driver License #: _____

Spouse's Social Security #: _____ - _____ - _____

Employer: _____

Spouse's Employer: _____

Employer Phone #: () _____ - _____

Spouse's Employer Phone #: () _____ - _____

If Rental Property Indicate: Yes / No

Is Occupant Other Than Applicant(s): Yes / No

Owner of Property: _____

Names & Social Security #'s of Occupants: _____

Activation Date: _____

(18 years & older only)

The undersigned hereby makes application for electrical service at the above address and agrees to pay for said service as measured by the System's meters, according to rates applicable at each billing. It is further agreed and understood that this document will apply for all future transfers of said service to this customer.

The Applicant(s) also agrees to make a deposit of \$_____ as security for any future electric bill he/she might owe, unless such a deposit is already being held by Dickson Electric System and no service is being provided. He/she further understands that in the event his/her service is voluntarily terminated at his/her request, that the above deposit will be returned if the final billing has been paid in full.

The Applicant(s) understand and agree that the Dickson Electric System may be limited in the amount of power that it can furnish due to limitations made by the wholesale power supplier. The Applicant(s) further understand and agree that the Dickson Electric System on some occasions may be unable to furnish electric power due to unforeseen and unavoidable circumstances.

The Applicant(s) agrees to notify the System in writing when the Applicant(s) desires said service disconnected or transferred to another location and agrees to pay for said service for a reasonable time after such notice, in order to permit the System to read or remove the meters and render bill. The Applicant(s) further agrees that in the event he/she fails to pay a legitimate account, the he/she will pay reasonable attorney's fees incurred by Dickson Electric System for collection of the delinquent account.

The undersigned hereby certifies that he/she at the present time does not owe the Dickson Electric System for prior service and further certifies that this application is his/her bonafide application and not submitted in conjunction with or on behalf of another person who has had electric service terminated by the System for failure to pay an electric bill. He/she further certifies that in the event this is a false application, he/she understands and agrees that electric service may be terminated immediately.

This Dickson Electric System does not discriminate on the basis of race, color, sex, age, handicap, religion or nation origin.

I hereby authorize Dickson Electric System to review my credit record and to make any necessary investigation of my credit transactions. In consideration of its undertaking to make such an investigation, I authorize any business or organization to give full information and records about me.

Applicant(s) Signature

Notary Public: _____

Route and Folio: _____

Sworn to and subscribe before me this _____ day of _____, 20 _____.

Approved: _____

My Commission Expires: _____, _____.

New Consumer Information

Work Order #: _____

Previous Account #: _____

Hook Up Fee: _____

Security Deposit #: _____

Construction Charges: _____

Connection Receipt #: _____

Wiring Permit #: _____

House: _____ Manufactured Home: _____ Non-Residential: _____ Commercial: _____ Other: _____