

In addition to this completed application, you will need to attach a copy of the business owner's lease or purchase and sales agreement or a note from the landlord indicating that the electricity is to be put in your name. You will also need to contact Desarae Dolan 401-568-6222 x223 at the District office to determine the amount of your electrical deposit. Electric deposits for Commercial Customers are based on an average two month consumption of electricity for a business of its' size. You must also present your driver's license at the time the deposit is dropped off in order for us to verify the information you provided on your application.

APPLICATION FOR ELECTRIC SERVICE

Company Name: _____

Service Address: _____

Mailing Address (if different from above): _____

Requested Date of Service: _____

Company Information:

Contact Name: _____ Title: _____

Telephone Number: _____ E-mail Address: _____

Cellular Number: _____ Federal ID Number: _____

Type of business: () Sole Proprietor () Incorporated () Municipal () Other: _____

Credit Information:

Bank /Financial Institution

Branch location:

I hereby apply for electric service and agree to take such service from Pascoag Utility District in accordance with the Terms and Conditions on file with the Rhode Island Public Utilities Commission. A copy of the Terms and Conditions is available at the District office, 253 Pascoag Main Street, Pascoag, RI. If my account becomes delinquent, I agree to pay all costs of collection, including all reasonable attorneys' fees and costs.

I further authorize Pascoag Utility District ("Pascoag:" or "District") to contact the financial institutions and credit references listed above.

I, _____ authorize _____ to have access to the billing and payment information for this account.

Customer's Signature: _____ Date: _____

For Company Use Only:

Account Number: _____ Deposit: _____ Application Date: _____

Verified by: _____ Approved by: _____ Date: _____