



**Residential Application**

Please complete the following information to apply for electric service:

Full Name: \_\_\_\_\_

Full Name (If joint Account Holder): \_\_\_\_\_

Service Address: \_\_\_\_\_

Mailing Address (If different then service address): \_\_\_\_\_

Date service is requested: \_\_\_\_\_

Type of Request: (Please circle one)      Rent / Own

Social Security #: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Social Security # (Joint Account): \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Date of Birth: (Joint Account) \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Phone # \_\_\_\_\_

Driver's License # (Optional): \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**UNDER THIS CONTRACT, YOU AGREE:**

- To pay for all services that SHELD provides to you, at regular current rates and according to the rules of the Department.
- That the meter(s) is the property of the Department and that no person except the Department's employees shall make any change, do any work of any nature whatsoever, upon the meter or connections leading to the meter without previous written notice to and written consent of the Department.
- To immediately notify the Department of any changes of ownership or change of tenancy of the above premises, and to retain liability for any and all changes for service until such time as the Department is notified of the change.
- That invoices not paid by the due date may be subject to service termination, turned over to a collection agency, or a lien may be placed on the property.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature (If joint Account Holder): \_\_\_\_\_ Date: \_\_\_\_\_

**For Office Use Only**

Account #: \_\_\_\_\_ Deposit Amount Collected: \$ \_\_\_\_\_