



LASSEN MUNICIPAL UTILITY DISTRICT

65 S. ROOP STREET * SUSANVILLE, CA * 96130

(530) 257-4174 * FAX (530) 257-2558

REQUEST FOR ELECTRIC SERVICE FOR RESIDENTIAL ACCOUNT

Please provide the following information so that your request may be processed:

SERVICE ADDRESS: _____ METER NUMBER: _____
(Location of Meter or Address of Building, etc) (If correct address is not known)

DATE SERVICE NEEDED (Please allow 24 hours, not including Holidays or weekends) _____

PRIMARY NAME ON ACCOUNT: _____
(As you would like billing to appear)

SPOUSE OR CO-APPLICANT NAME: _____

BILLING ADDRESS: _____
(Where you would like us to mail the statements and/or other information)

OWN RENT LANDLORD'S NAME _____ LL PHONE _____

CREDIT INFORMATION:

INDIVIDUAL(S) RESPONSIBLE FOR PAYMENT OF ACCOUNT (GUARANTOR):

PRIMARY :

SSN: _____ - _____ - _____ DRIVER'S LICENSE OR ID NUMBER: _____ STATE _____
PHONE NUMBER: _____ EMPLOYER: _____ Wk Phone _____

SPOUSE/CO-APP:

SSN: _____ - _____ - _____ DRIVER'S LICENSE OR ID NUMBER: _____ STATE _____
PHONE NUMBER: _____ EMPLOYER: _____ Wk Phone _____

CLOSEST RELATIVE: _____ RELATIONSHIP TO APPLICANT: _____

PERSONS AUTHORIZED TO DISCUSS INFORMATION REGARDING THIS ACCOUNT IN ADDITION TO GUARANTOR(S):

Name: _____ Address: _____
Phone: _____

Name: _____ Address: _____
Phone: _____

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A Connection Fee of \$25.00 will be charged for all connect or transfer requests involving an existing meter.**

DEPOSIT

\$ _____ Deposit Amount (Two times average consumption at the service location for all services)

METHOD OF PAYMENT OF DEPOSIT

- Cash or Cash Equivalent
- Surety Bond _____
(Expiration Date)
- Other Acceptable Non-Cash Guarantee _____
(Description)

I hereby apply for a waiver of the deposit and authorize that LMUD perform a credit check in accordance with applicable policy(ies).

(Signature of Authorized Applicant)

- Authorization of Waiver of Deposit _____
(CSR Initial)

I hereby apply for electric service to be supplied at the premises noted hereon, and promise to purchase and pay for same in accordance with the rates which shall from time to time be legally in effect, and to conform to and abide by the LMUD rules and regulations in force relating to the purchase of sale of said service.

Applicant further agrees to pay all bills, in accordance with the LMUD terms of sale. Should suit be brought or legal action taken on same by an attorney or collections, applicant promises to pay a reasonable fee for such action, including all costs of the court, and attorney's fees to the extent found by the court to be reasonable under the circumstances.

Signature (INDIVIDUAL RESPONSIBLE FOR PAYMENT OF ACCOUNT)

Date

Signature (INDIVIDUAL RESPONSIBLE FOR PAYMENT OF ACCOUNT)

Date

PLEASE NOTE: WHERE SERVICE IS BEING REQUESTED VIA AN EXISTING METER, SERVICE WILL BE MADE AVAILABLE WITHIN THREE (3) BUSINESS DAYS FOLLOWING FULFILLMENT OF ALL REQUIREMENTS OF THE DISTRICT (INCLUDING DEPOSIT OR APPROVAL OF WAIVER OF DEPOSIT REQUIREMENTS) AND THE ACCEPTANCE OF THE APPLICATION FOR SERVICE (OR AS SOON THEREAFTER AS DESIRED).

****REQUESTS FOR NEW CONSTRUCTION OR UPGRADES MUST BE MADE VIA AN APPROPRIATE APPLICATION. PLEASE USE THE APPROPRIATE FORM FOR THESE REQUESTS. (Forms available on the LMUD website or by contacting our office)**