

KIT CARSON ELECTRIC COOPERATIVE, INC. A Touchstone Energy® Cooperative The power of human connections®



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Account #:						
Meter #:						
Physic	al Address:					
Customer Signature:				Date:		
Date	Breaker Test	Walk Thru House	Review Billing History	Meter Check	Yes/No	Satisfied with outcome Yes/No
Approved by:				_ Date:		
Rec	ommenda	ations:				