



Kit Carson Electric Cooperative, Inc.
 P.O. Box 578
 Taos, NM 87571
 Email: csr@kitcarson.com
 1-800-688-6780 or 575-758-2258
 Customer Service: 1-800-944-8159 or 575-751-9064
 FAX# 575-758-4611

Request for Electric Service

| | | | | | |
|---|--|---|--|--|--|
| Consumer Information | | Please Fill Form Completely. If not applicable, specify N/A | | | |
| Type of Account (Check Box) | | <input type="checkbox"/> Primary Residential | <input type="checkbox"/> Secondary Residential | <input type="text"/> Scheduled Date of Service | |
| Commercial/DBA (Commercial Accounts Only) | | <input type="text"/> Tax ID# (Commercial Accounts Only) | | | |
| Business Name (Commercial Accounts Only) | | <input type="text"/> | | | |
| Name (Last, First, Mid Initial) | | <input type="text"/> | | | |
| Spouse's (Last, First, Mid Initial) | | <input type="text"/> | | | |
| Mailing Address | | <input type="text"/> | | | |
| City, State & Zip Code | | <input type="text"/> | | | |
| Home Telephone# | | <input type="text"/> | | Cell Phone# | |
| Other Telephone# | | <input type="text"/> | | Work Telephone# | |
| Social Security # | | <input type="text"/> | | Spouse Social Security# | |
| Drivers License # | | <input type="text"/> | | Spouse Driver License# | |
| Location Information | | Please provide any of the following information below | | *Please attach a clear copy of Drivers License or Picture ID | |
| Physical Address | | <input type="text"/> | | *Service Charge: \$15.00 Residential, \$50.00 Commercial/per Meter | |
| Previous Customer Name | | <input type="text"/> | | One-time Non-Refundable Fee Charged on Initial Statement | |
| Meter Number | | <input type="text"/> | | *Deposit is required prior to connection of service, | |
| Previous Membersep# | | <input type="text"/> | | Call or E-mail for Deposit Amount and/or info on Letter of Credit | |
| Would you like E-Billing(paperless billing)? Y N | | Email Address: <input type="text"/> | | | |
| <small> CUSTOMER ACKNOWLEDGES RECEIPT OF THE COOPERATIVE BY-LAWS AND AGREES THAT PATRONAGE CAPITAL AND/OR DEPOSITS UNCLAIMED FOR TWO (2) YEARS AFTER DATE OF DISTRIBUTION SHALL BE DEEMED ASSIGNED TO THE KIT CARSON ELECTRIC EDUCATION FOUNDATION FOR EDUCATIONAL SCHOLARSHIPS OR OTHER CHARITABLE PURPOSES IN ACCORDANCE WITH BY-LAW ARTICLE VII, SECTION 3. </small> | | | | | |
| Customer Signature | | <input type="text"/> | | Date | |
| For Office Use Only | | | | | |
| Type of Service | | | | | |
| Membersep# | | <input type="text"/> | | | |
| Location# | | <input type="text"/> | | | |
| Connect | | <input type="checkbox"/> New Service | | <input type="checkbox"/> | |
| Read In/Read Out | | <input type="checkbox"/> Street Light Connect | | <input type="checkbox"/> | |
| Service Charge Amount | | <input type="checkbox"/> Paid | | <input type="checkbox"/> Billed | |
| Deposit Amount | | <input type="checkbox"/> Paid | | <input type="checkbox"/> Billed | |
| Letter of Credit | | * Must be received within 10 business days of transfer* | | | |
| Comments: | | | | | |
| Employee Signature | | | | Date: | |