



APPLICATION FOR ELECTRIC SERVICE
Applicant Information Sheet

Please Print Clearly Planters EMC Contact info: Phone#: 478-982-4722 fax#: 478-982-4798

NAME:	
MAIL IN CARE OF NAME (if other than above):	
MAILING ADDRESS:	
(STREET)	(CITY) (STATE) (ZIP)
PHYSICAL SERVICE ADDRESS <small>(Your 911 address ** Required ** cannot be a P.O. Box):</small>	
(STREET)	(CITY) (STATE) (ZIP)
HOME PHONE #: () -	WORK PHONE #: () -
CELL PHONE #: () -	FAX #: () -
SOCIAL SECURITY #:	DRIVERS LICENSE #:
*** A Copy of your Driver's License or valid photo ID must be attached. (send in fine mode if faxed) ***	
Email Address:	
SPOUSE'S NAME:	
SPOUSE'S SOCIAL SECURITY NUMBER:	
TYPE OF SERVICE Residence: <input type="checkbox"/> Pump: <input type="checkbox"/> Mobile Home: <input type="checkbox"/> Clubhouse: <input type="checkbox"/> Other: <input type="checkbox"/> RENT: <input type="checkbox"/> OWN: <input type="checkbox"/>	
Is this service located within the city limits? YES <input type="checkbox"/> NO <input type="checkbox"/> <i>If so which city?</i>	
HAVE YOU EVER BEEN SERVED BY PLANTERS EMC IN THE PAST? YES <input type="checkbox"/> NO <input type="checkbox"/>	
SIGNATURE:	DATE: / /

According to the Fair Credit Reporting Act, § 604. Permissible purposes of consumer reports [15 U.S.C. § 1681b]. Planters EMC has the right to review your personal credit file under these conditions (F) otherwise has a legitimate business need for the information, (i) in connection with a business transaction that is initiated by the consumer; or (ii) to review an account to determine whether the consumer continues to meet the terms of the account.

===== BELOW IS FOR OFFICE USE ONLY =====		
MEMBERSHIP FEE: \$ 10.00	METER DEPOSIT: \$	TOTAL: \$
ACCOUNT NUMBER:	METER NUMBER:	
LOCATION NUMBER:		
SO NUMBER:	RECEIPT NUMBER:	
COMMENTS:		
SIGNATURE OF PEMC REPRESENTATIVE:		DATE: / /
