NORTHERN WASCO COUNTY PEOPLE'S UTILITY DISTRICT

APPLICATION FOR COMMERCIAL/INDUSTRIAL SERVICE

Today's Date:_____ Effective Date:_____

Name of Business:_____ Phone:_____

Service Address: _____

Billing Address:_____ Tax ID No._____

_____

Nature of Business:_____

Business Type: [ ] Nonprofit Organization [ ] Sole Proprietorship
[ ] Partnership [ ] Corporation
[ ] Other_____

Please furnish electric service at the indicated location(s) as I/ we request. Such service is to continue until I or we request it discontinued. It is understood that this service shall be furnished in accordance with the Rules and Regulations now or hereinafter adopted by the District, that electric service will be furnished under an established rate schedule for each location and, by signing this application, I/we agree to promptly pay all billings rendered thereunder. I/we hereby agree to pay all delinquent charges and fees, if any, as provided by the above Rules and Regulations, of the of the Northern Wasco County PUD. I/we agree that PUD crews have access to property for meter reading, to install, repair, or replace our overhead or underground facilities, including the right to excavate as may be necessary.

I/WE HEREBY CERTIFY THAT THE FOREGOING INFORMATION IS TRUE TO THE BEST OF MY/OUR KNOWLEDGE.

The undersigned hereby guarantees payment for the electric service provided to:_____
_____ by the District.
(Name of Business)

Principal Guarantors (please print legibly):

1. Printed Name:_____ Social Security #:_____
   Address: _____ Phone:_____ % Ownership____

   Signature:_____ Title:_____

2. Printed Name:_____ Social Security #:_____
   Address: _____ Phone:_____ % Ownership____

   Signature:_____ Title:_____

Any additional Owners/Principal Guarantors may be listed on the reverse side of this application.

I, _____, _____
(Printed Name) (Title)
have the authority to contract for electric services for the above named company and location. *Please provide NWCPUD with proper identification and attach supporting documentation.*

Signature:_____ Date:_____