

LAMB COUNTY ELECTRIC COOPERATIVE, INC.  
MEMBERSHIP AGREEMENT

This agreement made between Lamb County Electric Cooperative, Inc. (hereinafter called the "Cooperative") and "Applicant".

Applicant agrees that the proper execution of this agreement and payment of a \$5.00 membership fee constitutes application for membership in the Cooperative.

Applicant agrees to purchase electric energy from the Cooperative whose principal offices are located at 2415 South Phelps Avenue, Littlefield, Texas. Applicant agrees that, when accepted by the Cooperative, this agreement shall constitute acceptance of the Applicant by the Cooperative into the membership of the Cooperative. Applicant agrees to comply and be bound by the provisions of the Articles of Incorporation and Bylaws of the Cooperative, and such rules, regulations, and rates as may hereafter be adopted by the Cooperative as well as all rules and regulations prescribed by jurisdictional regulatory agencies.

Applicant agrees that all lines supplying applicant with energy, together with all switches, transformers, meters, appliances and equipment constructed or installed by the Cooperative shall at all times be and remain the sole property of the Cooperative, and the Cooperative shall have the right of access to said property to read meters, repair and service, and upon discontinuance of service for any reason, to remove same.

Applicant agrees that all amounts due under this agreement shall be payable at the Cooperative's offices located at 2415 South Phelps Avenue, Littlefield, Texas, or at such other locations as may be designated by the Cooperative. Applicant agrees to be responsible for paying any and all sums due the Cooperative for which Applicant may hereafter be liable for, charged with, or obligated to pay

APPLICANT AGREES TO ESTABLISH AND MAINTAIN SATISFACTORY CREDIT WITH THE COOPERATIVE. FAILURE TO ESTABLISH A SATISFACTORY CREDIT RATING WITHIN 10 DAYS COULD RESULT IN THE COOPERATIVE REQUIRING A DEPOSIT.

**TYPE OF MEMBERSHIP ( ) Individual ( ) Joint**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Service Address: \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security # \_\_\_\_\_ Driver's License # \_\_\_\_\_

**APPLICANT'S EMPLOYER INFORMATION**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**APPLICANT'S PREVIOUS UTILITY INFORMATION**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Person responsible for paying bills: \_\_\_\_\_

Residents living in household (other than spouse over 17): \_\_\_\_\_

Will a connected location be your residence? \_\_\_\_\_ Map Location \_\_\_\_\_

**SPOUSE INFORMATION**

Name \_\_\_\_\_

Social Security # \_\_\_\_\_ Driver's License # \_\_\_\_\_

**DRAFT INFORMATION**

Do you want a draft drawn on your account? \_\_\_\_\_ If yes please complete this portion.

Bank Name \_\_\_\_\_

Address \_\_\_\_\_

Bank Account # \_\_\_\_\_

**REFERENCES (persons who can verify information contained herein)**

Name \_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**VOTING DELEGATES:** Either husband or wife may represent the membership as voting delegate provided the voting delegate is not the voting delegate for another membership.

**APPLICANT'S SIGNATURE:** By signing this membership agreement, I hereby affirm that my spouse or I do not hold membership in the Cooperative and do not owe the Cooperative any monies under any other membership name. I further state that all above information is true and correct to the best of my knowledge, that I have read this agreement and agree to the conditions stated above, and that I was informed that a copy of the Cooperative's complete tariff is available for my inspection at it's offices in Littlefield.

Signed: \_\_\_\_\_ Date \_\_\_\_\_

Signature of Applicant

Cooperative's Acceptance

BY: \_\_\_\_\_ Date: \_\_\_\_\_

Authorized Representative