

## LAMB COUNTY ELECTRIC PRE-PAID SERVICE AGREEMENT

I understand that prepaid metering is a pay-as-you-go program; and as a participant of prepaid metering, I am required to keep enough cash available in my account, at all times, to cover my usage of electric service or my electric service will be subject to **immediate termination**. Inclement weather, including extreme heat or cold, as well as illness or other medical conditions will not postpone or prevent the termination of my electric service.

I understand that I will not receive regular monthly bills or termination notices from Lamb County Electric Cooperative Inc. (the "Cooperative"). It is my obligation to know and determine the amount of cash available in my prepaid account at any point in time. Information about my prepaid account, including history, usage, charges and payments will be available through the internet (smart hub) or by phone from an Interactive Voice Response System (IVR). I may modify or change notification settings for my prepaid account on the cooperative's designated website (SmartHub). I understand that it is my responsibility to manage and update the notification settings on my prepaid account.

I understand that all applicable charges and associated fees must be paid at the time I submit my application for prepaid service. Depending on circumstances, the charges and associated fees may include delinquent or unpaid outstanding balances, a Membership fee, as well as any other charges allowed under the Cooperative's tariffs, and an initial pre-payment of \$40.00 to be applied towards future energy use. If a deposit is being held by the Cooperative on an account the Member desires to switch to a pre-pay account, the deposit shall first be applied to items that must be paid with all remaining amounts added to the prepaid account for future purchases of electric service.

Pre-payments to the prepaid account may be made in any amount that is \$40.00 or greater at the Cooperative office, by phone, through SmartHub, or MoneyGram. Prepaid participants, who have had their electric service terminated due to a lack of cash in their account, are required to pay all outstanding amounts due, service charges, plus an additional pre-payment amount of no less than \$40.00 to be applied towards future energy usage. Energy assistance payments are added to the prepaid account when payment is received; pledges or similar documents of intent will not prevent the termination of electric service.

Participation in prepaid metering is voluntary. I may convert my prepaid account to a regular electric service account at any time. At such time, the Cooperative may require full payment of a security deposit to continue electric service.

\_\_\_\_\_(INITIAL) **I UNDERSTAND THAT LAMB COUNTY ELECTRIC COOPERATIVE, INC. IS PROVIDING THE PREPAID ACCOUNT TO ME AT MY REQUEST. I AGREE TO INDEMNIFY AND HOLD HARMLESS LAMB COUNTY ELECTRIC COOPERATIVE, INC., ITS EMPLOYEES AND AGENTS, FOR ANY AND ALL LOSSES OR DAMAGES INCURRED, BE THEY REAL OR CONSEQUENTIAL, INCLUDING DEATH, AS A RESULT OF MY PARTICIPATION IN PREPAID METERING OR AS A RESULT OF ELECTRIC SERVICE TERMINATION. ANY PERSON THAT CURRENTLY IS, OR WILL BE, RESIDING AT MY LOCATION, WITH A MEDICAL CONDITION OR A PERSON REQUIRING ELECTRIC SERVICE TO OPERATE MEDICAL EQUIPMENT NEEDED FOR THEIR HEALTH AND WELL BEING, IS MY SOLE RESPONSIBILITY. I KNOW AND ACCEPT THAT THERE ARE MEDICAL RISKS ASSOCIATED WITH PREPAID METERING'S IMMEDIATE TERMINATION OF ELECTRIC SERVICE AND I RECOGNIZE THAT I AM SOLEY LIABLE FOR ALL LOSSES AND DAMAGES INCURRED UNDER THESE CIRCUMSTANCES.**

I understand the difference between prepaid service and regular (post-paid) service. I certify that I have read this agreement, or had it read to me, and I understand the terms of this agreement. I agree to abide by this agreement and all service rules and regulations of the Cooperative. Of my own free will and accord, I do hereby request that Lamb County Electric Cooperative, Inc. establish a prepaid electric service account in my name.

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Email: \_\_\_\_\_ Date: \_\_\_\_\_

CSR: \_\_\_\_\_