

\_\_\_\_\_  
Member Number

P.O. Box 220  
Martin, SD 57551  
(605) 685-6581  
Email: [lacreek@lacreek.com](mailto:lacreek@lacreek.com)

APPLICATION FOR ELECTRICAL SERVICE

The undersigned applicant hereby applies for electric service and agrees to purchase electric energy from Lacreek Electric Association, Inc., upon the following terms and conditions.

1. The applicant will purchase from the Cooperative all electric energy used on the premises described below, and will pay therefore monthly in accordance with the Bylaws of the Cooperative.
2. The applicant grants the Cooperative an easement on the applicant's property as provided in the Cooperative's Bylaws and Policies.
3. The applicants will comply with the provisions of the Articles of Incorporation and Bylaws for the Cooperative, and all rules, policies, and rates schedules established pursuant thereto, as all the same now exist or hereafter are adopted or amended. The Bylaws are available on Lacreek Electric's website ([lacreek.com](http://lacreek.com)) or by request. Also included with this membership the applicant hereby agrees that \$6.00 of the amount paid for electricity each year is for a subscription to the Lacreek Electric Cooperative Connections.
4. Lacreek Electric Association, Inc., does not guarantee uninterrupted service. Lacreek Electric Association shall not be responsible for outages caused by Acts of God or other acts beyond their control. Consumers are responsible for giving notice to Lacreek Electric Association of any outages or other service problems. Lacreek Electric Association may at any time suspend service to consumers for making repairs, changes or improvements in the system. Lacreek Electric Association shall not be liable for any damages resulting from such interruption or failure.

\_\_\_\_\_  
Applicant's name (Please Print)

\_\_\_\_\_  
Spouse's name (Please Print)

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Box Number or Address

\_\_\_\_\_  
Box Number or Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Spouse

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Witness

In case of an address change, who may we contact?

\_\_\_\_\_  
Name

\_\_\_\_\_  
Box number or address

\_\_\_\_\_  
City State Zip

(For office use only)

The above application for service accepted this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
Lacreek Electric Association, Inc.

By: \_\_\_\_\_

\*This information is on a voluntary basis.