



Empire Electric Association, Inc.

801 N Broadway • PO Box K • Cortez CO 81321-0676 Phone
(970) 565-4444 • Toll Free 1-800-709-3726 • Fax (970) 564-4404

www.eea.coop

CONSUMER INFORMATION / RESIDENTIAL (Print or Type)

Connect Date: _____

Rate Options – _____
Time of Use & Demand _____
OR
All Energy _____

Purchase: _____ Rental: _____

Applicant: _____
Last First Middle Initial

Drivers License: _____ Social Security # _____
State Number

Birth Date: _____ Email Address _____

Would you like Paperless Billing? YES _____ NO _____

Home Ph: _____ Cell Ph: _____ Work Ph: _____

Service Address: _____
Street or PO Box City State Zip

Mailing Address: _____
(If Different than Service Address) Street or PO Box City State Zip

Second Applicant: _____
Last First Middle Initial

Drivers License: _____ Social Security # _____
State Number

Birth Date: _____ Cell Ph: _____ Work Ph: _____

I (We) authorize Empire Electric Association to connect service at the above address. I (We) authorize Empire Electric Association to process a credit report should the need arise.

_____ I (We) authorize and give my (our) consent to contact me (us) at the above phone numbers.

I (We) understand that a \$20 Connect Fee or a \$45 After 3pm / After Business Hours Fee will be charged on the first bill statement. This form requires a notary's signature and seal when it is not completed in the office...mailed, faxed, or emailed for signature(s).

Applicant Signature _____ Date _____

Second Applicant Signature _____ Date _____

1st Applicant _____

2nd Applicant _____

STATE OF _____ }
County Of _____ } ss

STATE OF _____ }
County Of _____ } ss

Subscribed, sworn to and acknowledged before me this _____ day of _____, 20_____

Subscribed, sworn to and acknowledged before me this _____ day of _____, 20_____

Notary Public: _____

Notary Public: _____

Commission Expires: _____

Commission Expires: _____

1st Applicant Signature

2nd Applicant Signature

Office Use Only

Membership Number: _____ Date Connected: _____ Lease/Rental Agreement/Letter _____

Deposit: Amount: _____ Power ADV: Yes _____ No _____ Rate _____ CSR Initial _____

Form updated 07/13/2021