



Tenant _____ Owner _____ Account # _____

Deposit Required: Yes – amount \$ _____ No _____ Location # _____

Connection Date * _____ Work Order # _____

COMMERCIAL / INDUSTRIAL APPLICATION FOR ELECTRIC SERVICE

Business Name: _____

Service Location: _____
House/Lot # _____ Street _____ Apt # _____

Mailing Address: _____
(If different from above) House # or PO Box _____ Street _____ Apt # _____ City _____ State _____ Zip _____

Business Phone: (____) _____ Email Address: _____

Square footage of Facility: _____ Federal Tax ID # (or Social Security #) : _____

Describe Business Operations _____

Premises for Electric Service is: Owned Rented – Property Owner: _____

Business Type: Proprietorship S-Corp C-Corp Not for Profit Partnership Other

Sales Tax Exempt? No Yes – Please submit appropriate ST- form.

By signing and submitting the application for service, the Business (“Customer”) agrees:

PROMISE TO PAY: To pay MMED for any and all obligations for services provided, including but not limited to all electric service charges and any miscellaneous charges incurred, within 25 days from invoice date. Security deposits, back invoice charges, and reconnection charges must be paid immediately prior to service being restored.

IDENTIFICATION: To provide at any time, upon MMED’s request, proof of identification (Photo ID) and/or passcodes to verify identity. Service can be denied if no proper identification or adequate assurance of payment is provided. MMED takes priority to maintain privacy of all business information per its adopted “Identity Theft Prevention Program” which can be reviewed upon request or on our website, www.mansfieldelectric.com.

COMMUNICATIONS: To authorize MMED to communicate with Customer concerning any and all financial and non-financial aspects and details of Customer’s service and account via any means, whether written, oral, via telephone, email or texting. MMED agrees to not use such contact information for commercial advertising purposes. By establishing service, Customer agrees to accept any charges incurred for such electronic communications originated from MMED.

BUSINESS AUTHORITY: The undersigned represents that s/he holds the officer, director, partner, member, or shareholder title indicated below; that s/he is authorized to act on behalf of the Business in executing this application; that such authority has been granted to him/her by the Business pursuant to its by-laws, operating agreement, general resolutions, or other governing authority of the Business; that the information being provided to MMED is true and complete and accurately discloses the current status of the Business; and that s/he agrees to advise MMED of any significant changes in any of the information that has been provided.

AUTHORIZED REPRESENTATIVE: If the Business is a corporation, a partnership, or a limited liability company, this application must be signed on its behalf by an officer, director, member, or shareholder of the Business, as the case may be, who is duly authorized for that purpose. If the Business is a not-for-profit corporation, one or more of its directors or officers must sign.

TERMS AND CONDITIONS: Customer acknowledges that service is subject to MMED’s “Customer Service Terms and Conditions”, and its applicable requirements and specifications, as are in effect from time to time, a copy of which is available upon request or viewed on our website, www.mansfieldelectric.com.

By signing below, I certify to MMED and agree for the Business described in this application, to all of the terms and conditions of the service agreement.

AUTHORIZED OFFICER/AGENT OF THE BUSINESS (CUSTOMER)

Legal Name of the Business _____
Application for Commercial/Industrial service must be signed by authorized officer or other agent of the Business

By _____ Title _____
Print Name of Officer/Agent

By _____ Title _____
Print Name of Officer/Agent

Signature/Date

Signature/Date