

CENTRAL GEORGIA ELECTRIC MEMBERSHIP CORPORATION

923 S. Mulberry Street

Jackson, GA 30233

APPLICATION FOR MEMBERSHIP AND ELECTRIC SERVICE

**RETURN
WITHIN
7 DAYS**

I (we) hereby apply for Membership with Central Georgia Electric Membership Corporation (CGEMC) and for electric service according to the terms and conditions set forth and agree as follows:

- To comply with and be bound by the provisions of the Articles of Incorporation, Bylaws, and such rules and regulations and policies as may be adopted from time to time by the Board of Directors of CGEMC; and when requested by CGEMC to execute and deliver easements or rights of way in accordance with such reasonable terms and conditions as CGEMC shall require across my (our) property for the furnishing of electric service to my (our) premises or to provide service to other premises.
- To indemnify, defend, and hold harmless CGEMC against all claims, demands, cost or expenses for losses, damages, or injuries to persons or property in any manner directly or indirectly arising from, connected with, or growing out of the transmission or use of electrical current at or on my (our) side of the meter, or arising solely by virtue of CGEMC providing electrical service to my (our) premises or arising from electric service to a manufactured or mobile home with the meter base mounted on the home. I (we) understand that CGEMC does not assume any responsibility for wiring beyond the meter or any responsibility for inspection of wiring beyond the meter.

Are you interested in the following services available through Central Georgia EMC (please check)?

Surge Protection

Total Electric Equipment Rebates

Internet Service

Outdoor Lighting

Date: _____

Location No. _____	<small>For Office Use Only</small>	Customer No. _____
	<small>For Office Use Only</small>	

Acct. Name _____ Ethnic Group _____
(Please Print) First Middle Last

If Acct. in Co. Name, Company Contact person _____ Title _____

E-mail address _____ Telephone No. _____
Area Code/Number

Pager No. _____ Cell No. _____ FAX _____

Billing Address _____
Box or Street City State Zip Code

Location Address _____
Box or Street City State Zip Code County

Employer _____ Telephone No. _____
Area Code/Number

Employer's Address _____
Box or Street City State Zip Code

If Renting, Property Owner's Name _____ Telephone No. _____
Area Code/Number

Relative Not Living in Household _____ Relationship _____

Address _____ Telephone No. _____
Box or Street City State Zip Code Area Code/Number

I (we) do solemnly swear (or affirm) that the information stated on this application for membership and electric service with Central Georgia Electric Membership Corporation is true and correct.

Signature _____ SS# or Federal ID# _____

Signature of Spouse or Co-Member _____ SS# or Federal ID# _____

Name of Spouse or Co-Member _____
(Please Print) First Middle Last