



Application for Membership and Service

Welcome to Central Valley Electric Cooperative, Inc. (CVEC). We value your business and look forward to meeting your energy needs. We are committed to providing you with the best service, quality and reliability.


The undersigned (the “Customer”) hereby makes request and application for membership and electric service. Customer agrees to purchase electric service from Central Valley Electric Cooperative (the “Cooperative”) and comply with Bylaws, Tariffs and Rules and Regulations of the Cooperative upon the following terms and conditions as such may be amended periodically:

1. **Deposit**. The Customer shall satisfactorily establish credit to secure payment for electric service, or, if such credit has not been established satisfactorily to the Cooperative, shall make a utility deposit, all in accordance with the Rules and Regulations of the Cooperative.
2. **Service**. Cooperative agrees to use reasonable diligence to provide electric utility service to a point of delivery at Customer’s service location. The electric service is to be provided and taken in accordance with the provisions of this Agreement and Cooperative’s approved Tariffs, Rules and Regulations. SAID TARIFFS, RULES AND REGULATIONS ARE A PART OF THIS AGREEMENT TO THE SAME EXTENT AS IF FULLY SET OUT HEREIN AND ARE ON FILE AND AVAILABLE AT THE COOPERATIVE’S OFFICE OR ON THE COOPERATIVE’S WEBSITE. Any Tariff, Rule and Regulation provision (including rates) may be changed by order or consent of the New Mexico Public Regulation Commission. .
3. **Protect Personal Info**. Customer may contact the Cooperative by phone or in person to inquire about the account. To protect the Customer, no information will be disclosed until the Customer is identified with such information as the Cooperative may reasonably require, including the last four (4) digits of the Customer’s Social Security Number.
4. **Access**. Customer shall provide to Cooperative reasonable and convenient access to Cooperative’s facilities, without obstruction or impediment, at all times pursuant to the Cooperative’s Rules and Regulations. If such access is not provided the Cooperative may discontinue service and remove or relocate its facilities.
5. **Payment**. Customer agrees to purchase and pay for electric service in accordance with the Cooperative’s Bylaws, Tariffs, Rules and Regulations. The Cooperative will render to Customer a statement of services rendered. Customer agrees to pay the total amount shown on such statement within twenty (20) days from its date or such other time as may be authorized by the Cooperative and in accordance with applicable Rules and Regulations of the Cooperative. Payment shall be made to Cooperative at its office in Artesia, by mail or online at www.cvecoop.org or through our SmartHub app.
6. **Breach**. Upon failure to make payment or perform any obligation under this Agreement, the Cooperative’s Bylaws, Tariffs, Rules and Regulations, the Cooperative shall have the right to discontinue service as well as seek such other remedies that may be available by law.
7. **Right-of-Way**. The Customer shall furnish to the Cooperative any Rights-of-Way, which may be necessary in the sole opinion of the Cooperative for the construction, maintenance and operations of necessary electric facilities, to service the applicant’s premises described below.

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**Central Valley Electric
Cooperative, Inc.**

A Touchstone Energy® Cooperative 

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PLEASE COMPLETE THE FOLLOWING INFORMATION			
PRIMARY APPLICANT INFORMATION			
Name/Business:			
Date of birth:	SSN/ Tax ID:		
JOINT APPLICANT – SPOUSE INFORMATION ONLY			
<i>You will be required to provide marriage license.</i>			
Name:			
Date of birth:	SSN:		
<i>CVEC bylaws permit persons joined in marriage to apply for joint membership. A joint membership will have both applicants listed on the account and both may inquire about account information or make changes to the service. Although only one vote is allowed per membership, either may cast the vote.</i>			
MAILING ADDRESS			
<i>Where your bill will be mailed.</i>			
Mailing Address:			
City:	State:	ZIP Code:	
NEW SERVICE ADDRESS			
<i>Where you would like to activate service.</i>			
Service Address:			
City:	State:	ZIP Code:	
Rent <input type="checkbox"/> Own <input type="checkbox"/>	If Renting, Name of Landlord:		
Landlord Phone:	Type of Service:	Residential	Irrigation
		Commercial	Oil Field
Date I will be responsible for service:			
CUSTOMER CONTACT INFORMATION			
E-mail address:			
Phone: _____	___ Home ___ Cell	Phone: _____	___ Home ___ Cell
JOINT APPLICANT CONTACT INFORMATION			
Spouse e-mail address:			
Phone: _____	___ Home ___ Cell	Phone: _____	___ Home ___ Cell
EMAIL ALERTS			
Would like to receive OUTAGE ALERTS from CVEC by email ?		No	Yes <i>(circle one)</i>
Email:		Same email as above _____	
Would like to receive periodic e-mails from CVEC on co-op news, member benefits and programs?		No	Yes <i>(circle one)</i>
Email:		Same email as above _____	
HISTORY			
Have applicant(s) had service with CVEC before?		No	Yes <i>(circle one)</i>
If yes, what name was the account listed under?			



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PLEASE COMPLETE THE FOLLOWING INFORMATION

AUTHORIZED THIRD PARTY CONTACT AGENT ON ACCOUNT THIS WILL NEED TO BE WITNESSED AND SIGNED BY A NOTARY

Name:
Date of birth: SSN: Phone:
E-mail address:
I AUTHORIZE CVEC TO GIVE BILLING INFORMATION TO THIS AUTHORIZED PERSON LISTED ABOVE
Signature: Date:

Notary signature required for third party authorization

State Of (SEAL)
County Of Subscribed and sworn before me this day of, 20.
For: (Printed name of Signature)
My Commission expires: Notary Signature:

THIS INFORMATION IS OPTIONAL AND WILL NOT IN ANY WAY AFFECT THIS APPLICATION OF MEMBERSHIP BUT WILL PROVIDE DATA BEING COLLECTED FOR FEDERAL GOVERNMENT REPORTING PURPOSES ONLY.

Table with demographic categories: Asian, Black/African American, American Indian/Alaskan Native, Hispanic/Latino, Native Hawaiian/Other, White, Other.

TELEPHONE CONSUMER PROTECTION ACT and FAIR DEBT COLLECTIONS PRACTICES ACT CONSENT

In order for us to service your account or to collect any amounts you may owe, we may contact you by telephone at any telephone number associated with your account, including wireless telephone numbers, which could result in charges to you. We may also contact you by sending text messages or e-mails, using any e-mail address you provide to us.

- I/We have read the above disclosure and agree that CVEC or their agents may contact me/us as described above.
I/We have read the above disclosure request that CVEC or their agents may do not contact me/us as described above. Please contact me/us by mail or door hangers.

Customer Signature

Date

SIGNATURE

I verify the above information to be true and complete. I have the opportunity to review CVEC's Bylaws and Rules and Regulations, which are available online at www.cvecoop.org or at the CVE office, and agree to be bound by and comply with the Bylaws and Rules and Regulations. I also agree that a credit check may be submitted to determine if a security deposit is required or to finance new construction. I can request a copy of this application.

Signature of Applicant: Date:

FOR CVEC OFFICE USE ONLY

Driver's License or ID: Deposit Amount \$ Deposit Paid
Proof of Ownership: (circle one) Warranty Deed Purchase agreement Property Taxes Rental Agreement
12 month Letter of Credit: Bank Draft
Service type: (circle one) Residential Yard light Small Com Large Com. Oil Well Irrigation
Comments:
Assigned Customer #: Date Received: CVE Employee: