

For CEC Office Use Only: Acct. # _____ SO # _____



Cherokee Electric Cooperative

www.cherokee.coop

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PHONE: 256-927-5524 • TOLL FREE: 1-800-952-2667 • FAX: 256-927-1642

COMMERCIAL & INDUSTRIAL APPLICATION

Date: _____

Company Name: _____

Contact Person: _____ Telephone Numbers: _____

Type of Business: _____

Business Address: _____

Billing Address: _____

Telephone Number at Business Address: _____

Email Address: _____

Legal Structure: Sole Proprietorship Corporation Partnership Other: _____

Name, Address and Phone Number of Owner(s), Officers, Partners, Stockholder(s):

If there is an existing yard light(s), do you want to continue use for a monthly charge? Yes No

Leasing Facilities? Yes No

If so, Name and Address of Person/Organization Leasing From: _____

Person Requesting Service: _____

Name and phone number of person(s) authorized to handle business for this account

Desired Connection Date: _____

Applicants Tax Identification (or SS) Number: _____

I understand that a discussion of current rates is available upon request at time of application. _____ Initials

Signature of Applicant: _____