

# Johnson County REMC

A Touchstone Energy® Cooperative 

## MEMBERSHIP APPLICATION Commercial/Industrial Membership

**Johnson County REMC**  
**P.O. Box 309**  
**Franklin, IN 46131**  
**(317) 736-6174 phone**  
**(317) 736-6127 fax**

Service Connect Date: \_\_\_\_\_

Business name \_\_\_\_\_

Business address \_\_\_\_\_

Service address (if different) \_\_\_\_\_

Business phone no. (\_\_\_\_) \_\_\_\_\_ Federal ID no. \_\_\_\_\_

Principal owner's name \_\_\_\_\_

Owner's home address \_\_\_\_\_

Address

City, State, Zip Code

Other officer's name \_\_\_\_\_

Title \_\_\_\_\_

Officer's home address \_\_\_\_\_

Address

City, State, Zip Code

Prior address of business \_\_\_\_\_

Address

City, State, Zip Code

Prior (most recent) electric utility provider name and address \_\_\_\_\_ No. of years \_\_\_\_\_

Name

Address

City, State, Zip Code

**Note: a security deposit may be required and must be paid in part or in full at the time service is requested. If partial payment is made, the balance of the deposit is due and payable in full upon receipt and payment of your first monthly bill, or service will be disconnected. Disconnection will occur in a timely fashion according to normal disconnect procedure for nonpayment.**

**EVERYTHING I HAVE STATED IN THIS APPLICATION IS CORRECT TO THE BEST OF MY KNOWLEDGE. I HEREBY AUTHORIZE YOU TO INVESTIGATE MY CREDIT RECORD. I AGREE TO THE TERMS SET FORTH IN THIS APPLICATION AND UNDERSTAND THAT I AM RESPONSIBLE TO PAY COST OF COLLECTION ON DELINQUENT ACCOUNTS, WHICH COST MAY INCLUDE, BUT IS NOT LIMITED TO INTEREST, COURT COSTS, COLLECTION AGENCY FEES AND REASONABLE LEGAL FEES. I AUTHORIZE YOU TO CALL ME AT ANY OF THE PHONE NUMBERS I PROVIDED TO YOU.**

\_\_\_\_\_  
Signature (Owner)

\_\_\_\_\_  
Date

..... FOR OFFICE USE ONLY .....

Account No. \_\_\_\_\_ Line Location \_\_\_\_\_

Meter No. \_\_\_\_\_

Membership No. \_\_\_\_\_ Rate \_\_\_\_\_

Geo-Loc \_\_\_\_\_