

146 Faculty Street Extension PO Box 1130 Boone, NC 28607 Office (828) 264-3671, Fax (828) 262-6726 Email forms to: NRLP-CSR@APPSTATE.EDU

APPLICATION FOR ELECTRIC SERVICE

Please complete the following information and return with either the prepaid service option selected, your deposit*, completed Guarantor Form or Credit Reference. *REMEMBER TO SEND A COPY OR BRING PHOTO ID.*

If Personal – NAME:			
	First	Middle	Last
DRIVER'S LICENSE NUMBER & STATE:		Date of Birth:	
If Business – COMPANY	NAME:		
Business Tax ID:			
ADDRESS TO MAIL BILL	:		
CONTACT INFO:	Email:	Cell Phone:	
	Home Phone:	Business Phone:	
SERVICE ADDRESS TO B	E CONNECTED: _		
APARTMENT COMPLEX	NAME:		
		METER NUMBER (if known):	
	(Next D	ay Service Only - <u>Excluding Weekends and Legal H</u>	l <mark>olidays</mark>)
Please choose your pre	eferred billing me itional monthly bi	otal) will be charged for all accounts. Thod below: Illing service. Security deposit required (amounts v 5 balance (+ connect fee) is required to start.	ary by location).
Are you a renter or property owner at the service address?			
Have you been a NRLP	customer in the p	oast? Yes No	
1 block: \$5 extra/r	month 2 blc	lock = 250 kWh of renewable energy** MORE INF ocks: \$10 extra/month Custom amount/mon rogram – supporting the Hospitality House MORE Add Additional Amount \$ C	th \$
SIGNATURE OF THE PERSON WHOSE NAME IS ON THE ACCOUNT IS REQUIRED TO CONNECT OR DISCONNECT SERVICE.			
Signature:		Date:	

*Please call for deposit amount or additional information. **The renewable resource currently offered is hydroelectric power.