

# TOWN OF LOUISBURG

110 W. Nash Street, Louisburg, NC 27549 (919) 496-3406 Fax (919) 496-6319

## COMMERCIAL / INDUSTRIAL APPLICATION FOR ELECTRICAL SERVICE

The undersigned (hereinafter called the Applicant) hereby applies for electrical service from the Town of Louisburg, North Carolina (hereinafter called the Seller) and agrees as follows:

THE LOCATION FOR WHICH SERVICE IS APPLIED:

When the Seller makes electric energy available to the Applicant, the Applicant agrees to purchase from the Seller, and pay monthly to the Seller for all electric energy used on the premises described above now owned or occupied by the Applicant, in accordance with the rate schedule for an Industrial or Commercial account and rules and regulations as may be established from time to time by the Seller. The Applicant further agrees to pay a minimum bill of \$\_\_\_\_\_ per month whether or not the corresponding number of kilowatt hours is consumed.

The Applicant will cause his premises to be wired in accordance with the National Electric Code as established by the National Board of Fire Underwriters and comply with and be bound by the provisions of the rules and regulations of the Seller, as may be adopted from time to time. **The acceptance of the application by the Seller shall constitute and agreement between the applicant and the Seller. The contract for electrical service shall continue in force one-year from the date service is made available by the seller to the Applicant, and thereafter until canceled by written notice given by either party to the other at least (30) days in advance.**

**NOTE: A NEW ACCOUNT SERVICE FEE OF \$12.00 WILL APPEAR ON YOUR FIRST UTILITY BILL AND IS NON-REFUNDABLE.**

_____ Name of Company	_____ Legal Structure of Business (Corporation, Partnership, Sole Proprietor)	
_____ Federal Tax ID # or DL# of Applicant	_____ State of Incorporation and/or location of Home Office	
_____ Names of Corporate Officers, Owners, partners	_____ Type of Business	
_____ Today's date	_____ Bank Reference	_____ Signature of Applicant
_____ Phone Number	_____ Address Utility Bill is to be mailed	

For office use only: \_\_\_\_\_

Deposit amount \$ \_\_\_\_\_