



# Red Lake Electric Cooperative

412 International Drive SW  
POBox 430  
Red Lake Falls, MN 56750-0430

Office: 218-253-2168  
Fax: 218-253-2630  
Email: [info@redlakeelectric.com](mailto:info@redlakeelectric.com)  
Website: [www.redlakeelectric.com](http://www.redlakeelectric.com)

Red Lake Electric Cooperative strives to provide a reliable and dependable supply of electricity at a proper voltage, the Cooperative, or any other utility, cannot provide perfect electric service at all times. It is beyond the control of Red Lake Electric Cooperative to completely eliminate interruptions in electric service. Should you suffer damage to personal property due to factors beyond the Cooperative's control, the Cooperative is not legally liable for this damage.

Red Lake Electric Cooperative shall not be responsible because of service interruptions or variations in service resulting from acts of God, or public enemies, accidents, strikes, riots, wars, repairs, orders of Court, or other acts reasonably beyond the control of the Cooperative. It shall not be liable for damages directly or consequential, resulting from such interruption or failure.

## APPLICATION FOR MEMBERSHIP AND FOR ELECTRIC SERVICE

The undersigned (hereinafter called the "Applicant") hereby applies for membership in and agrees to purchase electric energy from Red Lake Electric Cooperative, Inc. (hereinafter called the "Cooperative"), upon the following terms and conditions:

1. The Applicant(s) will pay to the Cooperative the sum of \$50.00, which will, if this application is accepted by the Cooperative, constitutes the Applicant's membership stock.
2. The Applicant(s) will have a "soft" credit report completed to determine if a security deposit is needed. If needed, the Applicant(s) will receive an adverse letter explaining the credit report results and once established good credit with 12 consecutive payments on-time or move off the service territory the deposit will become refundable. The Applicant(s) will earn interest on the security deposit at the specified rate determined by the State of Minnesota. If this electrical service is a rental property, all above mentioned requirements must be completed and received before becoming a member.
3. The Applicant(s) will, when electric energy becomes available, and the meter installed, purchase from the Cooperative all electric energy used on the premises described and will pay, therefore, monthly rates to be determined from time to time in accordance with the by-laws of the Cooperative, provided, however, that the Cooperative may limit the amount of electric energy which it shall be required to furnish to the Applicant.
4. The Applicant(s) will cause this premises to be wired in accordance with wiring specifications approved by the Cooperative.
5. The Applicant(s) will comply with and be bound by the provisions of the articles of incorporation and by-laws of the Cooperative and the Cooperative may from time to time adopt such rules and regulations.
6. If the Applicant(s) fails to pay any bill or debt owing the Cooperative during the normal collection period extended to all non-delinquent customers, the Cooperative may enlist the services of an independent collection agency. The Applicant(s) agrees to pay for the cost of these services in addition to paying the full amount owed to the Cooperative.

DATE: \_\_\_\_\_ 20 \_\_\_\_\_

APPLICANT SIGNATURE

JOINT APPLICANT SIGNATURE

**(PLEASE COMPLETE OTHER SIDE OF FORM)**

*Delivering Powerful Value Every Day*  
RLEC is an equal opportunity provider and employer



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(THIS INFORMATION TO BE COMPLETED BY APPLICANT)

## MEMBER INFORMATION

NAME \_\_\_\_\_  
FIRST \_\_\_\_\_ MIDDLE INITIAL \_\_\_\_\_ LAST \_\_\_\_\_

JOINT MEMBER NAME \_\_\_\_\_  
FIRST \_\_\_\_\_ MIDDLE INITIAL \_\_\_\_\_ LAST \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

STREET ADDRESS (If different than above.) \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

WORK PHONE \_\_\_\_\_ JOINT CELL PHONE \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_

JOINT SOCIAL SECURITY NUMBER \_\_\_\_\_

EMAIL \_\_\_\_\_

CHANGE OVER / START DATE: \_\_\_\_\_

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## IF RENTAL PROPERTY

OWNER'S NAME \_\_\_\_\_

OWNER'S ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

(THANK YOU FOR COMPLETING THIS FORM)

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(THIS SECTION WILL BE COMPLETED BY RED LAKE ELECTRIC COOPERATIVE)

## FOR OFFICE USE ONLY

ACCOUNT NUMBER \_\_\_\_\_ VENDOR NO. \_\_\_\_\_ ID VERIFIED \_\_\_\_\_

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