



**BUSINESS APPLICATION FOR UTILITY SERVICE**

All information must be completed for service to begin.

Once your application is submitted, a Member Service Representative will contact you to complete the process, including a credit check using your Business EIN/Tax ID. Completed applications can be returned to our office or via one of the following:

**EMAIL:**  
accountinfo@mleainc.com

**MAIL:**  
PO Box 278  
Roosevelt, UT 84066

**FAX:**  
435-722-5466

**Business Account Information**

**Legal Business Name:** \_\_\_\_\_ **Nature of Business:** \_\_\_\_\_

**Corporation**     **Partnership**     **LLC**     **Sole Proprietor**     **Other**    **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Service Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Meter #:** \_\_\_\_\_

**Owner/Management Information:**

**Name:** \_\_\_\_\_ **Position/Title:** \_\_\_\_\_ **Contact Phone:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Position/Title:** \_\_\_\_\_ **Contact Phone:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Position/Title:** \_\_\_\_\_ **Contact Phone:** \_\_\_\_\_

**Primary Contact**    Primary contact information will be used for billing and outage notification, including SmartHub enrollment.

**Contact Name:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_ **Contact Phone:** \_\_\_\_\_

**Business References**

**Reference Full Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Reference Full Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Reference Full Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Life Support**

Does anyone require a **Life Support Form**?     **Yes**     **No**    **Full Name:** \_\_\_\_\_

**Billing Set Up**

**Single Account Billing**     **E-Bill/Paperless**    **Email Address:** \_\_\_\_\_

**Invoice Billing**     **Mailed Paper Bills**    **FEIN:** \_\_\_\_\_

**Acceptance of Terms and Conditions**

By signing below, you agree to the terms and conditions listed on the reverse side of this document. If you have electronically signed this application, you also agree that the electronic signatures used on this agreement are the same as handwritten signatures for the purposes of validity, enforceability, and admissibility.

\_\_\_\_\_  
**Officer Name #1**

\_\_\_\_\_  
**Officer Signature**

\_\_\_\_\_  
**Officer Name #2 (if required)**

\_\_\_\_\_  
**Officer Signature**

## Terms and Conditions

The completed application, along with a Deposit or an in-office Utility score must be received before service can be started. Service orders for new services will be completed by the next business day. A membership charge of \$20.00 will appear on your first statement.

The Association will endeavor to furnish continuous service, but does not guarantee uninterrupted service and is not liable for any damage which the member may sustain by reason of the failure or partial failure of the power, failure or reversal of phases, or variation in service characteristics, whether caused by accident, repairs, storms, or incurred by the use of any service wiring, connection, instruments, service or appliances installed by or for the member; nor is the Association liable for damages that may be incurred due to the presence of the Association's property on the member's premises. In the case of three phase service required by the member, the installation and maintenance of adequate relays with circuit breakers to protect against single phase conditions and phase reversal are desirable and their installation and maintenance is the responsibility of the member.

The applicant agrees that all bills will be paid when due. Failure to do so will result in disconnection of service.

The applicant agrees to pay all reasonable attorney's fees and other costs of collection after default and referral to any attorney.

The applicant certifies that the information they have provided is true and accurate and any false statement made constitutes reason for immediate disconnection. The applicant further agrees to keep updated contact information on file, including, but not limited to, phone numbers, email address, and mailing address.

The applicant understands that this information may be provided to local government agencies on request.

The applicant hereby requests electric service from Moon Lake Electric Association, Inc., and herewith makes application for membership in said Association. The applicant further agrees to purchase electric energy from the Association, and be bound by the Articles of Incorporation, the By-laws and amendments thereto, and such Rules and Regulations as may be adopted from time to time by the Board of Directors, including providing access to the premises for the purposes of maintaining service, changing meters, and taking meter readings. The applicant also agrees that in order to maintain and/or restore electrical service, trees on their property interfering with overhead power lines may be trimmed at the discretion of Moon Lake Electric.

## SmartHub

### Tired of receiving paper bills?

SmartHub is Moon Lake Electric's payment application, and can get rid of those paper bills for you. An email will be sent to you with more information on how to register, or you can scan the appropriate QR code below.



### For Office Use Only

Service Classification:  New Service  Existing  Contract  Temporary      Processed Date: \_\_\_\_\_

Account #: \_\_\_\_\_      Utility Score: \_\_\_\_\_      Deposit/Bond Amount: \_\_\_\_\_

Deposit Information:  Bond  Paid in Full      Posted on SO:  Connect Fee  Deposit

Staking Fees: \_\_\_\_\_      Date Paid in Full: \_\_\_\_\_      Service Begin Date: \_\_\_\_\_

Yard Light      Pole Number: \_\_\_\_\_      Date Yard Light Discussed with Customer: \_\_\_\_\_

Processed By: \_\_\_\_\_