



Kit Carson Electric Cooperative, Inc.
 "Owned by Those We Serve"
 P.O. Box 578
 Taos, NM 87571
 1-800-688-6780 or 575-758-2258
 Customer Service 1-800-944-8159 or 575-751-9064
Request for Electric Service

FAX# 575-758-4611

Consumer Information						
Type of Account:	Primary Residential		Secondary Residential		Scheduled Service Date	
Commercial/DBA Commercial Accounts Only			Tax ID# (Commercial Acct Only)			
Business Name						
Name (Last, First, Middle)						
Spouse's Name						
Mailing Address						
City		State		Zip Code		
Home Telephone#		Work Telephone#		Cell Telephone#		
Other Telephone#		Fax Telephone#		E-Mail Address		
Social Security #			Spouse Social Security#			
Drivers License #			Spouse Driver License#			
Location Information						
Physical Address				*Please attach a clear copy of your drivers license or picture ID*		
				*Service Charge of \$15.00 for Residential Accounts		
Previous Customer Name				OR \$50.00 for Commercial Accounts per Meter*		
Meter Number				*Deposit is required prior to connection of service*		
Previous Membersep#						
Additional Services						
Would you like E-Billing(paperless billing)?			Y	N	Would you like to receive NMREC Enchantment Magazine? Y N	
<small> CUSTOMER ACKNOWLEDGES RECEIPT OF THE COOPERATIVE BY-LAWS AND AGREES THAT PATRONAGE CAPITAL AND/OR DEPOSITS UNCLAIMED FOR TWO (2) YEARS AFTER DATE OF DISTRIBUTION SHALL BE DEEMED ASSIGNED TO THE KIT CARSON ELECTRIC EDUCATION FOUNDATION FOR EDUCATIONAL SCHOLARSHIPS OR OTHER CHARITABLE PURPOSES IN ACCORDANCE WITH THE BY-LAW ARTICLE VII, SECTION 3. CONSUMER ACKNOWLEDGES THAT THE COOPERATIVE MAY DISCONNECT SERVICE TO THE ABOVE-DESCRIBED LOCATION WHEN PAYMENT OF CONSUMERS BILL AT A SEPARATE LOCATION IS DELINQUENT EVEN THOUGH THE ACCOUNT IS CURRENT AT THE FOREGOING LOCATION. CONSUMER AGREES THAT THE COOPERATIVE MAY SUBSCRIBE TO THE "ENCHANTMENT" FOR THE CONSUMER. </small>						
Customer Signature				Date		
For Office Use Only						
Type of Service						
Membersep#		Location#				
New Service						
Connect		Street Light Connect				
Read In/Read Out						
Service Charge Amount		Paid		Billed		
Deposit Amount		Paid		Billed		
Letter of Credit		* Must be received within 10 business days of transfer*				
Guarantor						
IF THE NEW ACCOUNT BECOMES DELINQUENT WITHIN THE TWELVE MONTHS THE GUARANTY IN EFFECT AND NEW CONSUMER WILL BOTH BE LIABLE FOR THE TOTAL DUE.						
Guarantor Signature				Date:		
Social Security #						
Comments:						
Employees Signature				Date:		