JULTIES DISTRIC			
	Utilities District of We	estern Indi	ana REMC
	P.O. Box 427, Bloomf	ield, Indiana 47424	
4ESTERN INDIA	Telephone: (812)-384-4446 (800)-489-	-7362 Fax: 812-3	84-2422
	Email: memberservice@udwiremc.com	Website: www.u	idwiremc.com
FOR OFFICE USE ONLY:			
	iviembersnip A	pplication (B	Business/Corporation)
ACCOUNT			Date
NUMBER:	New Appli		D. Varified by:
	Lindate or	<u>ار</u> ۱ly, I am an existing	D Verified by:
		ily, i all all costing	includer.
PLEASE PRINT			
Business/Corporation Name:			
Mailing Address:		Business Phone	<u>::</u>
City:	State:	Zip:	County:
Email Address:		Tax ID Number	:
Billing Contact Person(s):		Phone:	
		Phone:	
Additional Contacts:			
Name:		Phone:	
Name:		Phone:	
If you would like to get alerts a	and reminders, please check	all that apply:	
		elect cell phone	provider:
Due Date Reminder		AT&T	
Past Due Reminder		Verizon	
Returned check alert		Other	
Payment confirmation			
	Email ad	dress:	
The undersigned (hereinafter called the "Applic	ant") hereby requests electric service from t	the Utilities District of	Western Indiana REMC and herewith makes application for
			y this application and agrees to be bound by the Articles of
Incorporation, the By-Laws and amendments the	ereto, and such rules and regulations as ma	y be adopted from tin	ne to time by the Board of Directors.
This applicant gives consent to Ut	ilities District of Western Indiar	a REMC and ot	her businesses contracted by REMC
to contact them via telephone, au	tomated telephone dialing syst	tem, email and t	text message for pre-planned outages,
consumer feedback, and/or debt			
All statements are true and co	mplete to the best of my kno	wledge.	

Authorized Person's Signature

Printed Name