



Utilities District of Western Indiana REMC

P.O. Box 427, Bloomfield, Indiana 47424

Telephone: (812)-384-4446 (800)-489-7362 Fax: 812-384-2422

Email: memberservice@udwiremc.com Website: www.udwiremc.com

FOR OFFICE USE ONLY:

PREPAID METER

ACCOUNT NUMBER: _____

Membership Application

DATE: _____

New Application

ID Verified by: _____

Update only, I am an existing member.

APPLICANT INFORMATION - PLEASE PRINT

Full Name: _____

Mailing Address: _____
If Renting, Landlord's Name: _____

City, State, Zip _____ County: _____

Service Address: _____ Home Phone: _____

Cell Phone: _____ Social Security Number: _____

Date of Birth: _____ Email Address: _____

JOINT MEMBERSHIP APPLICANT INFORMATION: *Joint applicant is financially responsible and has the authority to make changes to the account at any time

Full Name: _____ Relationship to Applicant: _____

Social Security Number: _____ Date of Birth: _____

Cell Phone: _____ Email Address: _____

The undersigned (hereinafter called the "Applicant") hereby requests electric service from the Utilities District of Western Indiana REMC and herewith makes application for membership in said corporation. The applicant agrees to purchase electric energy used at the location covered by this application and agrees to 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.

This applicant gives consent to Utilities District of Western Indiana REMC and other businesses contracted by REMC to contact them via telephone, automated telephone dialing system, email and text message for pre-planned outages, consumer feedback, and/or debt collection purposes.

All statements are true and complete to the best of my knowledge.

Signature (Applicant)

Date

Signature (Joint Applicant)

Date