



A Touchstone Energy® Cooperative 

Application for Service Transfer - Owner

To:

Date:

On behalf of Lake Country Power's board of directors, management and employees, welcome. We are pleased to be your electric service provider and have you as a member of the cooperative. A condition of being a member is a completed and returned membership application.

We offer the kind of friendly customer service that will make you feel right at home whether you call us, or visit us in person, at one of our three full-service centers, located in Grand Rapids, Kettle River, or Mountain Iron.

This completed Application for Service Transfer, the deposit amount, and transfer fee will need to be returned to Lake Country Power prior to providing service. The electric service may be interrupted until the time this application is returned to Lake Country Power.

Service Centers:

Grand Rapids
2810 Elida Drive
Grand Rapids, MN 55744

Kettle River
4065 Highway 73 South
Kettle River, MN 55757

Mountain Iron
8535 Park Ridge Drive
Mountain Iron, MN 55768

1-800-421-9959

www.lakecountrypower.coop

Membership Information

For Office Use Only:

Application Mailed _____

Member Number _____

Deposit amount _____

Please print and complete this section in full.

PRIMARY MEMBER (name of applicant):

Name _____
First Middle Last

Mailing Address:

Address _____

City/State _____ Zip Code _____

Service Address: (different from mailing address)

Address _____

City _____ Zip Code _____

Service Telephone Number _____

Social Security # _____

Date of Birth _____

Driver's License/State ID# _____

E-mail address _____

Secure Password _____

(Maximum of 9 characters)

Any previous service with Lake Country Power: ___ No or ___ Yes (list information below)

Consumer Name Address City

JOINT MEMBER (co-owner/spouse):

Name _____
First Middle Last

Social Security # _____

Date of Birth _____

Driver's License/State ID# _____

E-mail address _____

Secure Password _____

(Maximum of 9 characters)

Any previous service with Lake Country Power: ___ No or ___ Yes (list information below)

Consumer Name Address City

Previous owner/occupant: _____

Date of possession/ownership: _____

A meter reading(s) and the date that reading was taken are required to complete the service transfer. Please verify the meter serial number(s), the meter reading, and enter them below.

Meter serial number

Meter Reading

Date taken

Membership/Service Agreement

I, the undersigned, am applying for membership in and agree to purchase electricity from Lake Country Power under the following terms and conditions.

1. I agree to comply with and be bound by the provisions of the Articles of Incorporation and Bylaws of the Cooperative as well as other rules, regulations and policies which may be adopted by Lake Country Power.
2. I agree to comply with all existing easements on said property from Lake Country Power or its predecessor organizations. I recognize that where the Cooperative has existing facilities on said property that I do grant Lake Country Power permission for Right-of-Way maintenance, operational procedures, and access to Cooperative equipment.
3. I agree not to interfere with or endanger the Cooperative's installed electrical system. I agree not to dig, excavate or grade in areas where underground electric facilities are located without contacting the proper notification center.
4. I recognize that Lake Country Power does not guarantee a regular and uninterrupted supply of energy and in case the supply of energy is interrupted or defective, the Cooperative shall not be liable for any damages resulting therefrom.
5. I recognize that the quality of such power supply may not be suitable, without modification, for some business and specialized personal uses.
6. I understand all members are automatically enrolled in the Operation Round Up® program unless they contact Lake Country Power to opt-out.
7. I understand all consumers are subject to a credit and personal information verification by a 3rd party consumer reporting agency. Lake Country Power requires a deposit at the time a member establishes service. The deposit amount will be determined based on a credit score and/or any previous account status. A deposit will be refunded and applied to the bill after 12 months of satisfactory credit history.
8. I agree to pay a \$25.00 non-refundable application fee to cover administrative costs.

Signature(s): _____ **Date** _____
Primary Member

Signature(s): _____ **Date** _____
Joint Member