

# RALLS COUNTY ELECTRIC COOPERATIVE

P O Box 157  
New London, MO 63459

## Second Meter Application

Account No. \_\_\_\_\_

Name \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone No. \_\_\_\_\_

As of January 1, 1985, your cooperative is required to have the information below on file for every individual account on our lines. Please complete and return.

Please check the one (1) item that reflects the main use of electricity. If energy purchased results in a sales tax liability due to use other than stated, the applicant assumes responsibility for remitting such tax due directly to the Director, Missouri Department of Revenue.

- |   |   |
|---|---|
| <input type="checkbox"/> HOUSEHOLD            | <input type="checkbox"/> FARM WELL                          |
| <input type="checkbox"/> HOUSE WELL           | <input type="checkbox"/> CABIN                              |
| <input type="checkbox"/> GRAIN DRYING         | <input type="checkbox"/> DAIRY BARN                         |
| <input type="checkbox"/> FARMING BARN         | <input type="checkbox"/> RENTAL PROPERTY (Income Producing) |
| <input type="checkbox"/> OTHER, SPECIFY _____ |   |

The above information is true and correct to the best of my knowledge.

Signature: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date \_\_\_\_\_

Initial \_\_\_\_\_