RALLS COUNTY ELECTRIC COOPERATIVE

P.O. Box 157

New London, MO 63459

Second Meter Application

Name _	 	 	
Address	 		
-			
- Phone #			

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.

HOUSEHOLD	FARM WELL
HOUSE WELL	
GRAIN DRYING	DAIRY BARN
FARMING BARN	RENTAL PROPERTY (Income Producing)
OTHER, SPECIFY	

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

Signature:		

SSN: _____

OFFICE USE ONLY	
Account #	Meter Location #
Application Accepted By	Date

(OVER FOR NOTARY SECTION)

STATE OF)			
) SS.	On this	day of	, 20
County of	_)			
before me personally appeared				
	(Members name)			
to me known to be the person		describ	ed in and who ex	xecuted the foregoing
*	(He/She/They)			
instrument, and acknowledged that		executed the same	e as	
-	(He/She/They)		(H	His/HerS/Their)
free act and deed.				
	IN TESTIMONY WHER	EOF, I have hereun	to set my hand a	and affixed my official
	seal, at my office in		•	•
	My term expires			

Notary Public