



GREENEVILLE LIGHT AND POWER SYSTEM

P.O. BOX 1690, GREENEVILLE, TENNESSEE 37744

PHONE 423-636-6200 FAX 423-636-6206

APPLICATION FOR ELECTRIC SERVICE INSTRUCTIONS

You can fill in the information on the application page using Adobe Acrobat. If you do not have Adobe Acrobat, it can be installed online at no cost to you. Simply go to www.adobe.com and follow the instructions. Fill out the application completely, print it, sign your name and fax or mail it along with this signed page to GLPS Customer Service at (423) 636-6206 or P.O. Box 1690 Greeneville, TN 37744-1690. The completed application forms can also be scanned and emailed to GLPS at customer@glps.net.

We will need a contact telephone number to let you know if a deposit is required, make sure you list a valid contact number below.

By signing below you (Applicant) hereby request Greeneville Light and Power System (GLPS) to supply electric service to the address indicated on the accompanying application. The applicant agrees to pay for electricity consumed according to the meter reading and at the Systems' published rates applicable to such services, and to abide to the rules and regulations of the said Greeneville Light and Power System for such services. In case the undersigned should become in the arrears in payment for service rendered, a duly authorized agent of the Greeneville Light and Power System is hereby authorized to enter the premises of the applicant and collect or remove the meter. For value received applicant hereby agrees to pay all that may become due under this service contract and the attached application for service. Applicant understands that it is a violation of state law to apply for service with the intent to avoid payment of lawful price or for any person to assist another in avoiding payment for electricity, either through making multiple applications for service at one address, or otherwise.

The applicant agrees to permit authorized personnel of GLPS free access to premises, unrestricted.

Signature: _____

Title: _____

Date: ____/____/____ Contact Phone Number: (____) - ____ - _____

Please print this form, sign above and fax along with your completed application and a notarized copy of your Driver's License and W-9 Form to GLPS Customer Service (423) 636-6206 or email to customer@glps.net.

Application for Service GLPS

- Business Name: _____
- Business Address: _____
- City: _____ State: _____ Zip: _____
- Employer ID (EIN) _____
- Driver's License #: _____
- Authorized Users: _____

- Billing Information: Address to be billed other than that above:

GLPS will notify you* if a deposit is required. New General Service Customers are required to provide payment security in an amount equal to twice the highest expected monthly bill.

Signature: _____

Please fax these completed forms along with a notarized copy of your Driver's License and W-9 Form to (423) 636-6206 or scan & email to customer@glps.net .

* If you do not receive a call or email from GLPS within 48 hours of sending these forms please call 423 636-6200 and ask for Customer Service or email customer@glps.net