

# Membership Application - Commercial -

**Office Use Only**

Account No. \_\_\_\_\_  
Membership Amount \_\_\_\_\_  
Deposit \_\_\_\_\_  
Connect Fee \_\_\_\_\_  
Total \_\_\_\_\_  
Date Paid \_\_\_\_\_  
By: \_\_\_\_\_

Required Information: Copy of Drivers License or Tax I.D. Certificate.

Name: \_\_\_\_\_  
As you want to appear on account

Mailing Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_  
Area Code &  
Telephone No.: \_\_\_\_\_

State of Incorporation: \_\_\_\_\_

Date of Incorporation: \_\_\_\_\_

Name of Corporate Officers: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Address of  
Principle Stockholder: \_\_\_\_\_  
\_\_\_\_\_

Type of Business: \_\_\_\_\_

Bank Reference: \_\_\_\_\_

Age of Company: \_\_\_\_\_

*Have you previously had service with Concho Valley Electric Cooperative? YES NO If Yes, When? \_\_\_\_\_*

*Have you previously had service with another Cooperative? YES NO If Yes, Name \_\_\_\_\_*

Date: \_\_\_\_\_

\_\_\_\_\_  
*(Print name of person responsible for acct.)*

\_\_\_\_\_  
**Signature**

D/L# \_\_\_\_\_ SS# \_\_\_\_\_ Tax ID No. \_\_\_\_\_