NEW COMMERCIAL ACCOUNT



All accounts require a deposit based on the two highest consecutive billing periods at the new service location, but no less than \$200. The deposit will remain on the account for the life of the account.

| Customer Infor | mation | | | | |
|--|---|--|-----------------------------------|---------------------|--|
| Name on Account: | Business Name: | | Type of Business: | | |
| | Social Security/Federal ID Number: | | Driver's License Number: | | |
| | Email: | | | | |
| | Primary Contact Name: Phone #: | | | | |
| | Are you a current or previous Santee Cooper customer? | | | | |
| Telephone: | Primary Phone: Secondary Phone: | | | | |
| New Service Address | | | | | |
| New Service Address: | Street Address | | | Apt/Unit/Lot # | |
| | City: State: | | | Zip Code: | |
| | Previous Business at this location (if known): | | | | |
| Directions to Service Address: | | | | Within city limits? | |
| Service Address. | | | | □ No | |
| Approximate square footage of building: | sq. ft. Building I | nspection Completed: | Yes Permit/ No Inspection Number: | | |
| Service Start Date: | Mondays - Fridays (except holidays) | | | | |
| Billing Address Please provide billing location if it is different from above service location. This location will be used to send your monthly bill. | | | | | |
| Street Address: | | | | Apt/Unit/Lot # | |
| City: | State: | | Country: | Zip Code: | |
| Programs Are you interested in any of the follow programs Santee Cooper offers? | | | | | |
| Billing & Payment Options Energy Efficiency Programs Other | | | | | |
| Terms and Conditions | | | | | |
| I hereby apply to Santee Cooper for electric service in accordance with "Terms and Conditions" and applicable rate schedules. Copies may be obtained at retail offices or online at: www.santeecooper.com/Rates I understand that accounts disconnected prior to one year are subject to an unfulfilled contract fee. In the event that my account is determined by Santee Cooper to need a demand rate (demand expected to exceed 50 KW in any three consecutive months of a 12 month period), I request to be billed on the following rate (check one): | | | | | |
| I further understand that I may only change this rate once every 12 months. | | | | | |
| Service Time Frame: One (1) working day if only a meter is needed, up to three (3) working days if only a meter and overhead service connection is needed, up to ten (10) working days if installation of overhead service is needed or up to fourteen (14) working days if installation of underground service is needed. | | | | | |
| Name of Customer or Representative: Date: | | | | | |
| Customer or Representative Signature: | | | | | |
| All new construction Any changes to el | | Meter Hub & Breaker Information All meter hubs need to be properly marked (e.g., unit number, lot number, street number, etc.). Santee Cooper is not responsible for marking meter bases. Meters will not be set in the meter bases that are known to be incorrectly marked or not marked at all. | | | |
| Office Use | Belov | v is for Santee Cooper offic | e use. | | |

Account ID:

Photo ID:

SC0921i (01/27/2014) (FS)

SA ID: