

**Commercial
Application for Service
Jefferson Davis Electric Cooperative, Inc.
Toll Free 1-800-256-5332**

Jennings Office
906 N Lake Arthur Ave.
P.O. Box 1229
Jennings, LA 70546
Phone: 337-824-4330
Fax: 337-824-8936

Hackett Office
815 Hwy 384
Bell City, LA 70630
Phone: 337-598-5700
Fax: 337-598-5708

Business Name _____ Date _____

Billing Address _____ Physical Address _____

I hereby authorize Jefferson Davis Electric Coop, INC. to connect electric service at the above referenced physical address. I fully understand I am responsible for billing and payment for All Electricity used until Jefferson Davis Electric Coop, Inc. is notified in writing on company letterhead.

Federal Tax ID # _____

Phone Number _____ Fax # _____

Alternate Contact Number _____

Email: _____

Authorized Representatives _____

Will service be overhead or underground? _____

Load size (amps/horsepower) _____

Membership Fee \$5.00; New Connect Fee \$50.00; Reconnect Fee \$25.00; Transfer Fee \$15.00;
Commercial Meter Deposit minimum \$300.00.

Signature: _____ Date: _____

I have received or already have a copy of the Cooperative's Member Handbook

Signature: _____ Date: _____