

Service Transfer Information Form

| For Office Use Only: | |
|------------------------|--|
| Date Mailed/Filled out | |
| Member Number | |
| Map Number | |
| Electric Account # | |

Phone: 218-743-3131 or 1-800-762-4048

Fax: 218-743-3644

Email:support@nieci.comWeb Site:www.northitascaelectric.com

PRIMARY MEMBER (name of applicant)

| Name | | | |
|-----------------------|---|------------------|---|
| first | middle | | last |
| | Billing Address: | Service A | Address (if different from Billing Addres |
| ldress | | Address | |
| City, State, Zip | | City, State, | Zip |
| Phone Number | | Phone Num | nber |
| SN* | | Cell Phor | ne |
| / L # | | Birth Date | ** |
| mail | | | |
| | JOINT MEMBERSHIP | (co-owner | / snouse): |
| ıme: | JOINI MEMBERSIIII | (CO-OWITEI | / spouse). |
| first | middle | | last |
| dress | | Cell | Phone |
| City, State, Zip | | Birth | Date** |
| Phone Number | |] | |
| SN* | | D/L# | |
| mail | | | |
| | | | |
| Are you or ho | ive you ever been a member of North Itasco | a Electric Co-op | , Inc. (circle one) Yes No |
| Would you lik | e to be enrolled in paperless billing (circle c | ne) Yes N | No. |
| nail | | | |
| renter list owner's n | ame | Date of T | ransfer |
| vious occupant if kn | own | Is this pro | operty a reconnect (circle one) Yes No |
| Co-op meter nun | phor | ٦ | ASONAL or RESIDENTIAL (circle one) |

^{*} A Social Security number is required for identification, deposit determination & dividend distribuition purposes.

^{**} Birth date is required to validate your identity when inquiring about your account. Validating your identity before your account information is given to you is a requirement under the Federal Red Flags Law. This validation is for your protection.

^{***} Please submit a \$25.00 plus tax processing fee for a total of \$26.72



Signature

Membership/Service Agreement

Date_

| | the undersigned, am applying for a Single or Joint membership and agree to purchase electrical s from North Itasca Electric Cooperative, Inc. under the following terms and conditions. | | | | | |
|----|--|--|--|--|--|--|
| 1) | Agree to comply with and be bound by the provisions of the Articles of Incorporation and Bylaws of the Cooperative as well as other rules, regulations and policies which may be adopted by North Itasca Electric Cooperative. | | | | | |
| 2) | Agree to furnish easement to North Itasca Electric Cooperative for Right-of-Way maintenance, operational procedures, and access to Cooperative equipment. | | | | | |
| 3) | Agree to comply with all existing easements on my property from North Itasca Electric Cooperative or its predecessor organizations. I recognize that where the Cooperative has existing facilities on my property that I do grant them permission to maintain their said facilities. | | | | | |
| 4) | Agree not to interfere with or endanger the Cooperative's installed electrical system. I agree not to dig, excavate, or grade in areas where underground electric facilities are located without contacting the proper notification center. | | | | | |
| 5) | Recognize that North Itasca Electric Cooperative does not guarantee a regular and uninterrupted supply of energy and in case the supply of energy is interrupted or defective, the Cooperative shall not be liable for any damages resulting therefrom. | | | | | |
| 6) | Recognize that the quality of such power supply may not be suitable, without modification, for some business and specialized personal uses. | | | | | |
| | Printed Name | | | | | |
| | Signature Date | | | | | |
| | Printed Name | | | | | |



Data Collection Information

Please provide the following information so that North Itasca Electric Cooperative, Inc. will be compliant with the Title VI of the Civil Rights Act of 1964.

The information regarding race, color or national origin designation is requested in order to assure the Federal Government, that North Itasca Electric Cooperative, Inc. complies with Federal Laws prohibiting discrimination on the basis of race, color, or national origin. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your request for services or to discriminate against you in any way.

Should you have any questions, you may contact our business office at 218-743-3131 or 800-762-4048.

Thank you for your cooperation in this matter.

| Name _ | | |
|-----------|--|------|
| Address _ | | |
| | | |

| Racial Categories | Ethnic Categories | | |
|-------------------------------------|------------------------|--|--|
| American Indian or Alaskan Native | Hispanic or Latino | | |
| Asian | Not Hispanic or Latino | | |
| Black or African American | | | |
| Native Hawaiian or Pacific Islander | | | |
| White | | | |



Auto Pay Sign Up Sheet

I authorize North Itasca Electric Cooperative and the bank listed below to initiate variable entries to my checking or savings account or my credit card.

This authorization remains in effect until I notify North Itasca Electric Cooperative in writing to cancel it in such time as to allow North Itasca Electric Cooperative to act on it.

| ELECTRIC ACCOU | NT # | | | | |
|---|------------------------------------|----------------|------------------------------|--|-----------------|
| NAME (PRINT) | | | | | |
| ADDRESS | | | | | |
| TELEPHONE # | | | | | |
| NAME OF FINANC | AL INSTITUTION | | | | |
| | UNT # | | | | |
| | | | | | |
| SAVINS ACCOUNT | # | | | | |
| | (Please att | tach a blank | k, voided che | ck) | |
| | TYPE O | F CARD (PLE | ASE CIRCLE) | | |
| VISA | MASTERCARD | DISCOV | ER AN | MERICAN EXPRESS | |
| CARD # | | EXPIR | ATION DATE_ | | |
| Payments will be processed the next business day. | ed on the 25 th of each | n month. If th | ne 25 th falls on | a weekend or holi | day, it will be |
| I would like to be signed | up for paperless billing | g: yes/no | (circle one) | | |
| If yes, email address | | | | | |
| SIGN HERE TO AUTHORIZE | | | DA | TE | |
| (SIGNATURE NEEDED FOR | CHECKING AND SAVII | ngs accol | JNT OR CREDI | t card transacti | ONS) |
| Please return this form wit | h a blank, voided che | eck to: | | Electric Cooperativ Bigfork, MN 56628 | re, Inc. |

"This institution is an equal opportunity provider, and employer."

North Itasca Electric Cooperative Community Trust



Operation Round Up ® is an ongoing charitable fund raising program to benefit worthwhile community projects. Funds are raised from North Itasca Electric Co-op., Inc. members who voluntarily round up their electric bills to the next highest dollar amount.

Q: How does the program work?

A: Each month, members who wish to participate allow North Itasca Electric Co-op.; Inc. to automatically round up their electric bills to the next highest dollar amount. For example, if your bill is \$68.51, your bill will be rounded up to \$69.00, meaning that month's contribution is 49 cents.

If your bill is \$68.90, your bill will be rounded up to \$69.00, contributing 10 cents.

The extra cents will be put in the North Itasca Electric Cooperative Community Trust. The most any member could contribute annually is \$11.88, but will average about \$6 a year per participant. Individually it doesn't sound like much, but collectively it adds up in a hurry. We average more than \$20,000 in annual giving.

Q: Where and how are the funds distributed?

A: Any organization in the NIECI service area is eligible to apply for a grant from the trust.

Funds will not be used to pay utility bills or go towards political campaigns. Grant application deadlines will be published in the Watts News.

Q: What are some possible uses for the fund?

A: Examples of grants would be funding for fire department equipment, EMS, youth & school programs, arts & education, senior citizen groups and other various community programs and projects.

Q: How will we know where the funds go?

A: A list of the funds awarded will be featured in the *WATTS NEWS* and there will be an annual report for the trust fund. Until the funds are distributed, they will be placed in a trust fund with the North Itasca Electric Cooperative Community Trust.

Q: Who will administer the trust?

A: A nine person volunteer board of directors from the North Itasca Electric Co-op., Inc. service area will review the applications and make grant recommendations.

Q: What is the role of the Operation Round Up ${\mathbb R}$ Trust Board of Directors?

A: Separate from the North Itasca Electric Co-op., Inc. Board of Directors, this non-paid board will oversee the trust, evaluate applications made to the program and make recommendations for issuing grants. They will have a set of bylaws by which to operate.

Q: What if I can't or don't want to participate in this program?

A: We realize that not everyone is willing or able to participate in the program. You may optout of the voluntary program. However, if you do not notify us of your decision to opt-out, you will automatically be enrolled in the program. You may opt-out at any time in the future if your situation changes or you may opt-back-in as well. To opt-out or to opt-in please notify us by calling 218-743-3131 or toll free 800-762-4048. You may also email us roundup@nieci.com or notify us in writing with your account number and name telling us of your desire to opt-out or opt-in.

Thank you for participating in this tremendous community support organization.

Please read the *WATTS NEWS* for more information on Operation Round Up®

N108.A 12.21

North Itasca Electric Co-op. has a showroom with a wide variety of Appliances for sale.

Your Co-op Offers: Quality Appliances, Great Prices, Great Customer Service, Fast & Friendly Delivery! Everything you expect from a Cooperative and more!







Bundling Deals:

Buy 3 appliances take 8% off, 4 appliances 10% off, 5 or more 15% off.

We can special order a gas range or dryer, but do not have them in stock!

Financing Available To Those Who Qualify:

90 days same as cash - 20% down (no interest)

1, 2, or 3-year contract - 20% down (4% interest). Contract is added to your electric bill.

Delivery Available: \$50

Remove Old Appliance: \$25



The electrical cord you need is provided with your appliance!

Place your order early, there can be long delays on some appliances!

Contact Roxanne for your appliance needs!

218-743-3132





