

Predominant Usage Form

SAC OSAGE ELECTRIC COOPERATIVE

IF INFORMATION IS SAME AS ORIGINAL MEMBERSHIP APPLICATION

MAP LOCATION _____

APPLICANT NAME: _____

APPLICANT ADDRESS: _____

PHONE NUMBER: _____

PREDOMINANT USE OF ELECTRICITY:

<input type="checkbox"/> Residential Household	<input type="checkbox"/> Farm Farm Well	<input type="checkbox"/> Residential Seasonal	<input type="checkbox"/> Church/Club or School	<input type="checkbox"/> Public Street and Highway Lighting
<input type="checkbox"/> House Well	<input type="checkbox"/> Farm Use Grain Dryer	<input type="checkbox"/> Cabin Home	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Public Authority (city, state, local)
<input type="checkbox"/> Rental Property (Income Producing)	<input type="checkbox"/> Dairy Barn	<input type="checkbox"/> RV Hookup/ Camp Site	<input type="checkbox"/> Commercial Account	<input type="checkbox"/> Sales for Resale

APPLICANT'S SIGNATURE _____ DATE _____
CO-APPLICANT'S SIGNATURE _____ DATE _____