



NORRIS PUBLIC POWER DISTRICT CO-SIGNER AGREEMENT

www.norrisppd.com

Office Hours
8:00 AM to 4:00 PM
Drop boxes are available
at each location

Office Locations:

Beatrice - 606 Irving St / PO Box 399
Beatrice, NE 68310
402-223-4038 / 800-858-4707
Fax 402-228-2814

Seward - 3111 Progressive Rd
Seward, NE 68434
402-643-2951
Fax 402-646-4695

Date: _____

Whenever a new customer requests that an electrical service connection be made, a deposit shall be collected according to the Norris Public Power District Regulation 300 - Residential & General Service Security Requirements.

For Residential services and Small General Service/Commercial Rates with an estimated highest monthly bill of \$300 or less, this deposit may be waived if a customer can obtain a co-signature on this form by a current District customer who has retained good/excellent credit history for the past twelve (12) consecutive months.

Co-Signer Information:

Co-Signer Account Number _____

Co-Signer Name _____
Last First MI

Mailing Address _____
Street Address City State Zip

Phone Numbers: Home _____ Work _____ Cell _____
(Applicant Home # is primary number for contact)

Social Security # _____ Birth Date _____
(Must provide at least the last 4 digits of SS#)

Email Address _____ Driver's License _____
State Number

Applicant Information:

Applicant Account Number _____

Applicant Name _____
Last First MI

Physical Address _____
Street Address City State Zip

Map Location _____

The Co-Signer and the Applicant agree to the following terms of the Co-Signer Agreement:

1. The co-signer guarantees payment of the entire balance on the applicant's account listed at the service location above should the applicant fail to keep the account balance current. Should the co-signer request to be relieved of the Co-Signer Agreement, he/she will be obligated to guarantee all electric charges to that date and a deposit shall be required of the applicant within 10 days or service will be disconnected.
2. If the above applicant is disconnected for non-payment or meter tampering, the co-signer agrees to pay the account balance in full within 10 days of notice.
3. The co-signer may request the applicant's account balance information at any time.
4. Disconnection of service or requests for service will only be accepted from the applicant.
5. The Co-Signer Agreement shall become null and void when the applicant has retained a perfect credit history for a period of twelve (12) consecutive months.

Co-Signature

Applicant Signature

District Representative

Date

Date

Date