

ELECTRIC HEAT RATE APPLICATION

Member(s) Name:	
Account Number:	
Address:	
Phone Number:	Cell:
E-Mail:	
Primary Heating Source:	
Electric Baseboard	
Electric Forced Air	
Ground Source Heat Pump	
☐ Air Source Heat Pump	
Electric Boiler	
Secondary Heat Source:	
I acknowledge that a Sun River Electric representative will have access to the metering location as needed for verification and maintenance.	
Signature:	
Printed Name:	Date:
A Touchstone Energy	

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