



RESIDENTIAL ACCOUNT APPLICATION

Part 1: Applicant (Please Print)

First Name: _____ Last Name: _____ Date of Birth (MM/DD/YYYY): ___/___/___

Driver's License Number: _____ Other ID: _____

Home Phone: _____ Cellular: _____ E-Mail Address: _____

Place of Employment: _____ Employment Contact Number: _____

Photocopies of identification are required with submission of this application

Part 1A: Co-Applicant (Please Print)

First Name: _____ Last Name: _____ Date of Birth (MM/DD/YYYY): ___/___/___

Driver's License Number: _____ Other ID: _____

Home Phone: _____ Cellular: _____ E-Mail Address: _____

Place of Employment: _____ Employment Contact Number: _____

Part 2: Customer Choice – Pricing Option

Time-of-Use: The price depends on what time you use your electricity.

Tiered Pricing: Uses a certain amount of electricity each month at a lower price. Once that threshold is exceeded, a higher price applies.

For more information on Time-of-Use and Tiered Pricing and tools to help you decided which price structure is right for you. Please visit www.oeb.ca/choice

Part 3: Service Address: _____ Meter#: _____

Mailing Address (If Different from Service Address): _____

Date Service Commences (MM/DD/YYYY): ___/___/___

Will you be owning or renting the Service Address?: Owning _____ Renting _____

Renting: Owner's Name: _____ Owner's Phone Number: _____

Do you require a final reading at your previous address?: No _____ Yes _____ Final Read Date (MM/DD/YYYY) ___/___/___

Previous Service Address (If Applicable): _____ Previous Account Number: _____

Part 4: Pre-Authorized Payments: If choosing the Pre-Authorized Plan, please complete the Pre-Authorized Payment Authorization Form and enclose a void cheque.

Part 5: Conditions

As a condition of receiving services, the information collected will be used by the Customer Care Department to establish and maintain a service connection, and for billing and collection activities. If you are a tenant, the owner's name and address may be used to provide notice in the event your service is disconnected. The owner may also be notified of your final billing date. Customer's that are listed above and have signed below accept financial responsibility for the account and can access all account information.

I/We, the undersigned:

- Certify all the information above to be true and complete;
- Authorize and consent to the receipt and of provision of account and credit information from credit grantors, credit bureaus and suppliers of service.

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____

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