



Application for Residential Electric Service

By signing below, I am applying for electric service from Potomac Electric Power Company. I agree to pay all bills according to rules stated in the General Terms and Conditions and the Electric Service Rules and Regulations effective during the period of service. I understand that it is my responsibility (1) to select the appropriate rate for my account, (2) to give Pepco access to the premises to read the electric meter or to examine, repair or remove Pepco equipment, and (3) to notify Pepco three days in advance of the date I will no longer be responsible for electric service. I understand that I will be held responsible for electric bills until I notify Pepco.

Pepco's General Terms and Conditions state that a residential customer may be required to pay a security deposit under certain conditions. The deposit amount is based on two-twelfths of the annual estimated or actual charge in the ensuing 12 months.

Rate Schedules and General Terms and Conditions for Furnishing Electric Service may be examined at Pepco's offices at 701 Ninth Street, N.W., Washington, D.C. 20068. For other locations please call (202) 833-7500. (Copies are available on request.)

Any questions ? Call (202) 833-7500

▼ DETACH HERE ▼

KEEP THIS PART FOR YOUR RECORDS

▼ DETACH HERE ▼

FOLD FORM & SEAL BEFORE MAILING

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PLEASE PRINT

SERVICE ADDRESS				APT. NO.
CITY:		STATE:		ZIP CODE:
MOVE IN DATE:	MO.	DAY	YR.	SOCIAL SECURITY NO.:
APPLICANT'S NAME:				
SPOUSE OR NAME CONT.:				

BILLS % ADDRESS:				APT. NO.
% CITY:		STATE:		ZIP CODE:
DO YOU <input type="checkbox"/> OWN? <input type="checkbox"/> RENT?	LANDLORD / AGENT'S NAME:			
	NAME OF APPLICANT'S EMPLOYER (COMPANY)			
DATE EMPLOYED:	MO.	DAY	YR.	PHONE NUMBER:
				AREA CODE (WORK)
				AREA CODE (HOME)
ELECTRIC HEAT? <input type="checkbox"/> YES <input type="checkbox"/> NO		GAS HEATING? <input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> OTHER?
ELECTRIC WATER HEATER? <input type="checkbox"/> YES <input type="checkbox"/> NO		GAS WATER HEATER? <input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> OTHER?

FOLD HERE ▼

DID YOU HAVE AN ACCOUNT WITH Pepco AT YOUR PREVIOUS ADDRESS? YES NO

IF YES, ACCOUNT NAME? _____

SERVICE ADDRESS	APT. NO.			
IS ACCOUNT TO BE CLOSED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, WHAT DATE?			
	MO.	DAY	YR.	
APPLICANT'S SIGNATURE X _____	DATE SIGNED:	MO.	DAY	YR.

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LANDLORD / AGENT ONLY

If this Application for Electric Service has been completed by anyone other than the applicant named above, this section must be completed by the landlord or agent.

LANDLORD/AGENT NAME: _____

LANDLORD/AGENT PHONE: _____

AREA CODE (WORK) _____

LANDLORD/AGENT SIGNATURE: X _____

PEPCO USE ONLY

(RG)	ACCOUNT NO.	ISSUED BY	MO.	DAY	YR.
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▼ FOLD FORM, SEAL & MAIL ▼