

HIGH PLAINS POWER COPY

METER# _____

LOCATION# _____

ADDRESS: _____

CUSTOMER# _____

NAME: _____

I WOULD LIKE THIS METER PULLED. I UNDERSTAND THAT IF I HAVE IT RESET WITHIN 12 MONTHS, I WILL BE CHARGED FOR THE BASIC MONTHLY MINIMUM DURING THE MONTHS THAT IT WAS OUT AND A RECONNECT FEE OF TIME PLUS MILEAGE OR A MINIMUM OF \$45. A DEPOSIT MAY ALSO BE REQUIRED.

SIGNATURE: _____ DATE: _____

EMPLOYEE SIGNATURE: _____

.....

CUSTOMER COPY

METER# _____

LOCATION# _____

ADDRESS: _____

CUSTOMER# _____

NAME: _____

I WOULD LIKE THIS METER PULLED. I UNDERSTAND THAT IF I HAVE IT RESET WITHIN 12 MONTHS, I WILL BE CHARGED FOR THE BASIC MONTHLY MINIMUM DURING THE MONTHS THAT IT WAS OUT AND A RECONNECT FEE OF TIME PLUS MILEAGE OR A MINIMUM OF \$45. A DEPOSIT MAY ALSO BE REQUIRED.

DATE: _____