

**Applicants must complete all fields. Print and return signed application to Wahkiakum PUD  
by FAX: 360-795-8441, by mail: Wahkiakum PUD, PO Box 248, Cathlamet WA 98612 or in person at 45 River Street, Cathlamet**

**APPLICATION FOR NON-RESIDENTIAL SERVICE**

This service will be used for (select all that apply): Commercial  Agricultural  Industrial

INTENDED USE Describe nature of business: \_\_\_\_\_

INTENDED KW LOAD \_\_\_\_\_ Tax ID or Social Security No \_\_\_\_\_

Company Name \_\_\_\_\_ DBA (if applicable) \_\_\_\_\_

Owner Name \_\_\_\_\_ Phone \_\_\_\_\_

1. Primary Contact \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

2. Secondary Contact \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Service Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

(Select One): Own/Buying Building  Renting/Leasing  If Renting/Leasing, Landlord \_\_\_\_\_ Phone \_\_\_\_\_

(Optional) Enroll in E-Billing: No  Yes  If Yes, provide email address: \_\_\_\_\_

I hereby authorize Public Utility District No. 1 of Wahkiakum County to furnish my premises with electric energy and/or water services, subject to all the provisions of PUD Rules and Regulations and Rate Schedules now existing or hereafter adopted, copies of which are available for inspection at all times at the District office, and agree to pay all charges as provided for therein and that the obligations of the parties are covered thereby. All Service Charges are non-refundable. This application shall automatically grant the District the right to access upon the property for the performance of the District's services. "I agree that I am responsible for all services and charges incurred on this account until the account is terminated. I promise to pay such services and charges, together with interest if delinquent and all court costs, costs of collection and attorney's fees, if applicable."

Signature \_\_\_\_\_ Date \_\_\_\_\_