MERCED IRRIGATION DISTRICT
ELECTRIC SERVICES

Merced Irrigation District

744 West 20th St. PO Box 2288, Merced, CA 95340
Customer Service Phone: 209-722-3041/Fax 209-354-2876
MIDcustomerservice@mercedid.org

Application for Residential Electric Service

***** M I D USE ONLY *****		
CSR Name:	**Deposit Amount:** **Or reason for waiving:**	**Additional Comments:**
Account #:	**Write-offs :**	
Rental Agreement:	**Approved by** **Date**	

Today's Date: _____ Service start date: _____

1. Applicant is (circle one): Owner Agent Tenant

2. Billing name: _____
Legal Name of Responsible Party

3. Service address: _____
Street *City* *Zip Code*

4. Mailing address: _____
Street *City* *Zip Code*

5. Residential phone: _____ Business Phone: _____

6. Social Security Number: _____ Date of Birth: _____

7. Driver license number: _____ State: ____ Email: _____

8. Employed by: _____ Number of Years: _____

10. Name of co-applicant: _____

11. Relationship to applicant: _____ Email: _____

12. Co-applicant's social security number: _____ Date of Birth: _____

13. Co-applicant's driver license number: _____ Business Phone: _____

▪Applicants will be subject to an online credit screening. Based on the result of said screening, a deposit may be required to activate service. ▪By applying for or accepting service, I/we agree to abide by all of the electric service requirements, rate schedules, and the rules and regulations of the District concerning such service (rules are available at mercedid.org).▪I/we agree, in order for us to service your account or to collect any amounts you may owe, we may contact you by telephone at any telephone number associated with your account, including wireless telephone numbers. We may also contact you by sending text messages or emails, using any email address you provide us. Methods of contact may include using pre-recorded or artificial voice messages and/or the use of an automatic dialing devise, as applicable. I/we have read this disclosure and agree that the District may contact me/us as described above.

Applicant Signature (required): _____
ID verification required Date

Co-Applicant Signature (required): _____
ID verification required Date

Note: In accordance with published MID rules, supporting documents may be required.

I/we understand that we will be held financially responsible for all fees associated with energy theft, meter tampering and/or diverted power including, but not limited to, estimated cost of diverted power, damage to equipment/facilities, investigative and attorney fees.

_____ *Initial here* _____ *initial here*