

Requested Service Date _____



COMMERCIAL OR INDUSTRIAL CREDIT APPLICATION

GENERAL INFORMATION

Customer Name _____ Business Phone Number _____

Legal Name of Business _____ Home/Other Phone Number _____

Social Security # _____ Federal Tax ID # _____

Service Address _____

Mailing Address _____

Name of Local Contact Person _____ Phone Number _____

Email Address _____

Business Classification

Sole Proprietorship Corporation (Please list officers below.)

LLC - Limited Liability Company
(Indicate of member managed or manager managed. Please list members and titles below.)

Partnership (Please indicate if general or limited. List names and titles below.)

Owners/Officers/Partners/Members _____

Date of Incorporation or Business Start-up _____

Building Status Owned Rented/Leased – Please provide owner’s name _____

Briefly Describe the Nature of Your Business _____

Does This Building Serve as a Residence or Provide Living Quarters? Yes No

CREDIT INFORMATION

Previous/Current Commercial Account With Upper Peninsula Power Company? Yes No

If Yes, Please Indicate Address _____ Service Dates _____

Did You Purchase an Existing Business? Yes No

BANK OR LENDING INSTITUTION

Name _____

Location _____ Contact Person _____

*****PLEASE SEE REVERSE SIDE FOR ADDITIONAL INFORMATION*****

PARTNERSHIP – SOLE PROPRIETORSHIPS – LIMITED LIABILITY COMPANIES

Please notify Upper Peninsula Power Company on a separate sheet of paper if there are any changes in ownership, financial responsibility or business structure.

SECURITY DEPOSITS

A security deposit may be required if the customer has an unfavorable credit rating or unpaid utility bill. The company may require a deposit from a new customer if the customer exhibits an unsatisfactory record of bill payment within the first 6 months after service is commenced. Payment of bills on or before the due date shall constitute a satisfactory record of bill payment.

For the purpose of obtaining the credit described above, and any future credit granted to the undersigned by the creditor named above, the undersigned, jointly and severally, represent that the above statements are true and complete, authorize the creditor named above, or its agents, to verify them and obtain additional information concerning our credit standing and furnish the same to others, and agree to the provisions of any rules, regulations or agreements of the creditor named above governing such credit. This application is creditor's property. The undersigned understand that it may be a federal crime punishable by fine or imprisonment or both to knowingly make any false statements concerning any of the above facts, under the provisions of Title 18, United States Code, Section 1014.

Name (Please Print) _____

Signature _____ Date _____

Title _____

Name (Please Print) _____

Signature _____ Date _____

Title _____