

Service Begin Date: \_\_\_/\_\_\_/\_\_\_

New Account Number \_\_\_ - \_\_\_ - \_\_\_

Receipt Number \_\_\_\_\_

Required Deposit Amount of \$100: \_\_\_\_\_

Received By: \_\_\_\_\_

Payable to Lake Placid Village, Inc.



# Application For Residential Electrical Service



Lake Placid Village, Inc.  
2693 Main Street  
Lake Placid, NY 12946

Applicants Name: \_\_\_\_\_ , \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
LAST FIRST

Any other name(s) you have gone by (former/maiden): \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address of Service: \_\_\_\_\_ Billing Address: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Email Address: \_\_\_\_\_

I would like my bills: Emailed  Mailed  Both Email & Mailed

I acknowledge that I must inform the Lake Placid Village Office, in person when I am vacating this property. I also understand and acknowledge that it is my responsibility to contact this office of any changes to the information on this application. \_\_\_\_\_ Initial

Emergency Contact: (Nearest Relative/friend): \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Emergency Contact Address: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Employer Address: \_\_\_\_\_

Name of spouse and/or other adult occupant(s): \_\_\_\_\_

Ages of children in the residence: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Are you or any residents physically disabled or mentally incapacitated, including blindness, infirmity, or limited mobility? YES NO

Is there any use of life support systems in the home, such as dialysis, oxygen, apnea, or iron lung? YES NO

Are there any factual circumstances indicating any other serious or hazardous health situations that would be effected by a prolonged power outage? YES NO

Applicant's Signature \_\_\_\_\_ Today's Date: \_\_\_ / \_\_\_ / \_\_\_

**\*A COPY OF YOUR DRIVER'S LICENSE AND DEPOSIT IS REQUIRED\***

Lake Placid Village Municipal Electric is hereby requested to furnish the undersigned with electrical service. Such service will be supplied by the municipality under the rules and regulations as filed with the New York State Power Authority and available for inspection at the Village Office. The undersigned agrees to pay for services in accordance with applicable service classifications.