



Commercial New Construction Checklist

The items checked below apply to your application for electric service

- Application for Service form (signed and returned).
- IRS Form W-9 – Request for Taxpayer Identification Number and Certification ([See Note 1 below](#))
This form must be completed if the account will be held in the name of the business.
- Copy of Identification
*If **Yes** is marked for “Are you the owner of this business” on the Application for Service, then Driver’s License, State ID Card, Passport, Military ID, or 1-551 (immigrant visa) is acceptable.*
*If **No** is marked for “Are you the owner of this business” on the Application for Service, then an Employee ID is acceptable. ([See Note 2 below](#)).*
- Membership Fee of \$25.00 (refundable) must be paid (new members only).
- Application fee of \$80.00 (non-refundable) must be paid.
- New Service meter installation fee of \$50.00 (non-refundable) must be paid.
- Meter Base installation fee of \$100.00 (non-refundable) must be paid.
An additional \$100.00 (non-refundable) is required for Current Transformer (CT) service installations.
- Service Deposit (based on projected usage or business type).
In lieu of cash deposit, customer can provide a surety bond or irrevocable letter of credit.

Notes:

1. Corporations, Partnerships, and Limited Liability Companies (LLCs) must provide a federal tax ID number at the time of applying for electric service.
Sole proprietors (individuals), S Corporations, or single-member LLCs should provide their social security number if a tax ID is not available.
2. If the person applying for service is not an owner of the business, a notarized affidavit must be signed stating the person applying for electric service has the authority to do so.

Return all required documents to Carroll Electric Cooperative:

- by electronic submission to <https://www.carrollecc.com/apply-for-service>
- by fax to 870-423-4815 (non-legible documents may cause a delay in application processing)
- by mail to the appropriate office (if unsure, call 1-800-432-9720)

Carroll Electric Coop.
PO Box 4000
920 Hwy 62 Spur
Berryville, AR 72616

Carroll Electric Coop.
PO Box 329
707 SE Walton Blvd
Bentonville, AR 72712

Carroll Electric Coop.
PO Box 280
5056 Hwy 412B
Huntsville, AR 72740

Carroll Electric Coop.
PO Box 389
511 E Court St
Jasper, AR 72641



CECC USE ONLY

Account Location No. _____

Member Sep. _____ Member No. _____

COMMERCIAL APPLICATION FOR SERVICE

Application Date	Requested Service Start Date	Service Location Physical Address (Street, City, State, Zip)	Apt. / Suite
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Company Legal Name	D.B.A.
<input type="text"/>	<input type="text"/>

Federal Tax ID	Company Phone Number	Additional Phone Number	If there is a SECURITY LIGHT at this location, would you like to keep it? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="text"/>	<input type="text"/>	<input type="text"/>	

Primary Contact	Title	Contact Phone Number	Type of Business <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation
<input type="text"/>	<input type="text"/>	<input type="text"/>	Are you the owner of this business? <input type="checkbox"/> Yes <input type="checkbox"/> No

Billing Address (Street, City, State, Zip)	Email Address
<input type="text"/>	<input type="text"/>

Does this property have multiple meters? Yes* No

*Please list the meter number(s) or describe the facilities that will be served at this location.

Has there ever been electric service at this location?
 Yes No (If No, complete New Construction section on page 2.)

Comments

eSERVICES

Please enroll me in eBILLING

Must establish myAccount ID and password to view bills. See myaccount.carrollecc.com for details.

eBilling Email Address

Please enroll me in eDRAFT

I authorize Carroll Electric to electronically debit my account monthly, for the amount stated on my bill(s) and if necessary, electronically credit my account to correct erroneous debits. I understand this authorization remains in full force and effect until I notify Carroll Electric in writing, at least five days before the due date. Cancellation instructions are available at carrollecc.com or by calling 1-800-432-9720.

Checking

Name(s) on Bank Account

Bank Name

Bank City, State

Savings

Bank Routing Number (max 9 numbers)

Bank Account Number (max 15 numbers)

Use the information above to electronically debit my existing accounts (existing members only.)

COMPLETE THIS SECTION ONLY IF APPLYING FOR SERVICE AT A NEW CONSTRUCTION SITE

Property Description (Lot, Block, Phase, Subdivision, etc.)

Do you need single-phase or three-phase power?
(If three-phase, additional costs apply.)

What secondary voltage is needed at this site?

Will this structure have provisions for the following? **(If No, additional costs apply for an unqualified load.)**

Sanitation System

- Sanitary Sewer
- Septic
- No

Pressurized Water System

- City
- Well
- No

Permanent Foundation

- Yes
- No

The Applicant, whose signature appears below, applies to the CARROLL ELECTRIC COOPERATIVE CORPORATION of Berryville, Arkansas, (hereinafter called the "Cooperative") for membership and/or electric service to be supplied at the location herein described and, upon request, at any other location within the area served by this Cooperative. This agreement shall supersede and replace any previous agreement and shall apply to each location the Cooperative furnishes electric service to the applicant.

The Applicant agrees to be bound by and to comply with all Rules of the Arkansas Public Service Commission (APSC), other applicable laws and regulations, as well as the Cooperative's approved tariffs, Articles of Incorporation, Bylaws, consumer classifications, rates, charges, and service rules and regulations and all other applicable terms and conditions set by the Cooperative, both as the same now exists or may hereafter be adopted, repealed, amended, or supplemented; to pay all fees, deposits, and charges in accordance with the rates, rules, and regulations as now exist or as may hereafter be adopted; and authorizes the Cooperative to verify information provided, including the use of any credit reporting agency to verify identity.

The Cooperative shall operate on a not-for-profit basis as defined by law. As such, all patronage capital, if any, shall be held by the Cooperative in accordance with Ark. Code Ann. §23-18-327 until such time as determined by the Cooperative. In the event the Cooperative disburses patronage capital, it shall remain the Applicant's responsibility to keep the Cooperative informed of Applicant's mailing address.

In the event the Applicant's account becomes delinquent, the Cooperative shall follow the rules and tariffs approved by APSC, and thereafter, the Applicant agrees to surrender the membership fee, deposit, and future patronage capital to extinguish such indebtedness plus any accumulated late charges and interest. Further, the Applicant agrees to pay all costs of collection including attorney's fees, collection fees, and any other related fees and costs.

The Applicant will cause and keep his premises to be wired in accordance with wiring specifications of the appropriate governing jurisdiction and the Cooperative assumes no responsibility for loss or damage due to defective wiring and/or equipment located on the Applicant's side of the meter installation or other agreed to point of delivery.

The applicant understands that the Cooperative shall use reasonable diligence to provide a constant and uninterrupted supply of electric power and energy hereunder. If the supply

of electric power and energy shall fail or be interrupted, or become defective through acts of God, governmental authority, action of the elements, public enemy, epidemic/pandemic, cyber-attack, accident, strikes, labor troubles, required maintenance work, inability to serve right-of-way, equipment failure, or any cause beyond the reasonable control of the Cooperative, the Cooperative shall not be liable therefore or for damages caused thereby.

Electric service shall be supplied within the voltage range prescribed by Arkansas Public Service Commission's Special Rules - Electric. The Cooperative's standard service voltage will be 120/240 volts, AC, unless otherwise stated in accordance with the approved schedules, rules, regulations, or by mutual agreement. However, in all cases, the voltage supplied to the Applicant may vary by ± 5 percent measured at the meter. Voltage variations in excess of those specified shall not be considered a violation if variations are caused by:

- (1) The operation of power equipment on a customer's premises;
- (2) The action of the elements; or,
- (3) Infrequent and unavoidable fluctuations of short duration in station operation.

The Applicant hereby acknowledges the Cooperative's obligation and right to maintain its facilities. Applicant agrees to provide the Cooperative access to Applicant's premises and easement rights consistent with industry standards as necessary where Cooperative facilities exist. Applicant further acknowledges existing easements on Applicant's property, whether recorded, written, or prescriptive.

The Applicant agrees SECURITY DEPOSITS are subject to the rules of the APSC and are subject to the following conditions:

- (1) Residential or personal deposits shall be waived or refunded based on the Applicant's timely payment history defined by the APSC and evidenced by a certification letter from a previous utility, a third-party personal guarantee from another qualifying individual, or other personal credit measurements determined by the Cooperative.
- (2) Commercial deposits, surety bonds, or irrevocable letters of credit shall be provided by the Applicant to the Cooperative and shall remain in effect for the duration of service. Should a commercial account not have a corporate taxpayer identification number issued by the Internal Revenue Service, the Cooperative shall also require a personal guarantee from the Applicant's principal business owner(s).

The Applicant agrees that the Cooperative shall not be held liable for any losses, damages, penalties, or expenses for any delay in delivery, including any delay at any point in the supply chain, of materials of any nature necessary for this project. If for any reason, the quantities of any such materials available to the Cooperative are less than its total needs, the Cooperative may allocate its available supply of materials among its members and/or itself, for any use whatsoever, in such a manner the Cooperative deems proper in its sole discretion, without thereby incurring liability on account of the method of allocation or its implementation. In no event shall the Cooperative be liable for any incidental, consequential, punitive, or any other damages, expenses, or costs of any kind, including, but not limited to, lost profits, loss of use, loss of time, shutdown, or slowdown costs, inconvenience, lost business opportunities, damage to goodwill or reputation, or other economic loss, regardless of whether such liability is based on breach of contract, tort, strict liability or otherwise, and even if advised of the possibility of such damages or such damages could have been reasonably foreseen.

I understand that information on this application may be used for the purpose of a credit check and depending on the results of that credit check, I may be required to pay a deposit in full prior to electric service being connected. I hereby authorize the Cooperative along with the Cooperative's affiliates and/or service providers to obtain a credit report from any reputable credit reporting agency.

Maintaining a valid phone number will help both members and the Cooperative in reporting and restoring outages. Further, it may be necessary at times to contact members by phone electronically or otherwise regarding your account. In keeping with the provisions of the Telephone Consumer Protection Act (TCPA), 47 U.S.C. § 227, the Cooperative requires your express written consent prior to contacting you by telephone, facsimile, or text message for any non-emergency purpose using any automated telephone dialing system (ATDS) or artificial or prerecorded voice (each, an "Automated Method"). Your rights under the TCPA can be found at www.carrollecc.com/tcpa-rights or upon request. Should you choose to withhold or subsequently revoke your consent pursuant to the TCPA, or otherwise refuse to provide a valid phone number, it is with the understanding that we might not be able to reach you regarding important information about your electric service. By signing where indicated below, I authorize the Cooperative, along with the Cooperative's affiliates and/or service providers, to contact me using email and/or any Automated Method of the Cooperative's choosing, at the phone number and/or email address provided by me.

I HEREBY APPLY TO THE CARROLL ELECTRIC COOPERATIVE CORPORATION FOR MEMBERSHIP AND/OR ELECTRIC SERVICE IN ACCORDANCE WITH THE TERMS AND CONDITIONS APPEARING ABOVE.

Applicant Signature: _____

Date: _____

Co-Applicant Signature: _____

Date: _____

**CARROLL ELECTRIC COOPERATIVE CORPORATION
BUSINESS AFFIDAVIT**

STATE OF _____)
COUNTY OF _____)

Member No. _____
Date: _____

Comes now _____, and being first duly sworn on oath
(printed name of affiant)

states the following statements are factual and correct:

1. That the undersigned affiant is the _____
(position in company or corporation, i.e., owner, president, etc.)

of _____.
(name of company)

2. That the affiant has the legal authority to act on behalf of _____ in all respects
(name of company)
regarding the establishment of electric service and membership with Carroll Electric
Cooperative Corporation, including the authority to financially bind the said company in all respects
related to said membership and receipt of electric service.

3. That the list of individuals and/or *Utility Management Company* listed on page 2 of this affidavit has
the authority of the affiant and company to conduct business with Carroll Electric Cooperative
Corporation on behalf of the affiant and company.

4. That the affiant has full authority to execute this Affidavit on behalf of

(name of company)

Affiant Signature **Affiant Phone Number** **Affiant email address**

SUBSCRIBED AND SWORN TO BEFORE ME, a Notary Public on this _____ day of
_____, 20_____.

Notary Public

My Commission Expires: _____.

Carroll Electric Cooperative Corporation
Business Affidavit

Individuals

The following individuals have the authority of the affiant and company listed on page 1 to conduct business with Carroll Electric Cooperative Corporation on behalf of the affiant and company:

Name	Position	Email
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Utility Management Company

The following *Utility Management Company* has the authority of the affiant and company listed on page 1 to conduct business with Carroll Electric Cooperative Corporation via email on behalf of the affiant and Company: (If multiple representatives within the management company will be conducting business, list only the email domain. If giving authorization to specific individuals within the management company, list those individuals in the table above.)

Company Name: _____

Address: _____

City/State/Zip Code: _____

Phone: _____

Email domain (e.g., @gmail.com): _____

must obtain your correct taxpayer identification number (TIN), which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid).
- Form 1099-DIV (dividends, including those from stocks or mutual funds).
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds).
- Form 1099-NEC (nonemployee compensation).
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers).
- Form 1099-S (proceeds from real estate transactions).
- Form 1099-K (merchant card and third-party network transactions).
- Form 1098 (home mortgage interest), 1098-E (student loan interest), and 1098-T (tuition).
- Form 1099-C (canceled debt).
- Form 1099-A (acquisition or abandonment of secured property).

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

Caution: If you don't return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued);
2. Certify that you are not subject to backup withholding; or
3. Claim exemption from backup withholding if you are a U.S. exempt payee; and
4. Certify to your non-foreign status for purposes of withholding under chapter 3 or 4 of the Code (if applicable); and
5. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting is correct. See *What Is FATCA Reporting*, later, for further information.

Note: If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding. Payments made to foreign persons, including certain distributions, allocations of income, or transfers of sales proceeds, may be subject to withholding under chapter 3 or chapter 4 of the Code (sections 1441–1474). Under those rules, if a Form W-9 or other certification of non-foreign status has not been received, a withholding agent, transferee, or partnership (payor) generally applies presumption rules that may require the payor to withhold applicable tax from the recipient, owner, transferor, or partner (payee). See Pub. 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*.

The following persons must provide Form W-9 to the payor for purposes of establishing its non-foreign status.

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the disregarded entity.
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the grantor trust.
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust and not the beneficiaries of the trust.

See Pub. 515 for more information on providing a Form W-9 or a certification of non-foreign status to avoid withholding.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person (under Regulations section 1.1441-1(b)(2)(iv) or other applicable section for chapter 3 or 4 purposes), do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Pub. 515). If you are a qualified foreign pension fund under Regulations section 1.897(l)-1(d), or a partnership that is wholly owned by qualified foreign pension funds, that is treated as a non-foreign person for purposes of section 1445 withholding, do not use Form W-9. Instead, use Form W-8EXP (or other certification of non-foreign status).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a saving clause. Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items.

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if their stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first Protocol) and is relying on this exception to claim an exemption from tax on their scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 24% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include, but are not limited to, interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third-party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester;
2. You do not certify your TIN when required (see the instructions for Part II for details);
3. The IRS tells the requester that you furnished an incorrect TIN;
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only); or
5. You do not certify to the requester that you are not subject to backup withholding, as described in item 4 under "*By signing the filled-out form*" above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code*, later, and the separate Instructions for the Requester of Form W-9 for more information.

See also *Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding*, earlier.

What Is FATCA Reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all U.S. account holders that are specified U.S. persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code*, later, and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you are no longer tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account (other than an account maintained by a foreign financial institution (FFI)), list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9. If you are providing Form W-9 to an FFI to document a joint account, each holder of the account that is a U.S. person must provide a Form W-9.

• **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note for ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040 you filed with your application.

• **Sole proprietor.** Enter your individual name as shown on your Form 1040 on line 1. Enter your business, trade, or “doing business as” (DBA) name on line 2.

• **Partnership, C corporation, S corporation, or LLC, other than a disregarded entity.** Enter the entity’s name as shown on the entity’s tax return on line 1 and any business, trade, or DBA name on line 2.

• **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. Enter any business, trade, or DBA name on line 2.

• **Disregarded entity.** In general, a business entity that has a single owner, including an LLC, and is not a corporation, is disregarded as an entity separate from its owner (a disregarded entity). See Regulations section 301.7701-2(c)(2). A disregarded entity should check the appropriate box for the tax classification of its owner. Enter the owner’s name on line 1. The name of the owner entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For

example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner’s name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity’s name on line 2. If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, enter it on line 2.

Line 3a

Check the appropriate box on line 3a for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box on line 3a.

IF the entity/individual on line 1 is a(n) . . .	THEN check the box for . . .
• Corporation	Corporation.
• Individual or • Sole proprietorship	Individual/sole proprietor.
• LLC classified as a partnership for U.S. federal tax purposes or • LLC that has filed Form 8832 or 2553 electing to be taxed as a corporation	Limited liability company and enter the appropriate tax classification: P = Partnership, C = C corporation, or S = S corporation.
• Partnership	Partnership.
• Trust/estate	Trust/estate.

Line 3b

Check this box if you are a partnership (including an LLC classified as a partnership for U.S. federal tax purposes), trust, or estate that has any foreign partners, owners, or beneficiaries, and you are providing this form to a partnership, trust, or estate, in which you have an ownership interest. You must check the box on line 3b if you receive a Form W-8 (or documentary evidence) from any partner, owner, or beneficiary establishing foreign status or if you receive a Form W-9 from any partner, owner, or beneficiary that has checked the box on line 3b.

Note: A partnership that provides a Form W-9 and checks box 3b may be required to complete Schedules K-2 and K-3 (Form 1065). For more information, see the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

If you are required to complete line 3b but fail to do so, you may not receive the information necessary to file a correct information return with the IRS or furnish a correct payee statement to your partners or beneficiaries. See, for example, sections 6698, 6722, and 6724 for penalties that may apply.

Line 4 Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space on line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third-party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys’ fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space on line 4.

1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2).

- 2—The United States or any of its agencies or instrumentalities.
- 3—A state, the District of Columbia, a U.S. commonwealth or territory, or any of their political subdivisions or instrumentalities.
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities.
- 5—A corporation.
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or territory.
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission.
- 8—A real estate investment trust.
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940.
- 10—A common trust fund operated by a bank under section 584(a).
- 11—A financial institution as defined under section 581.
- 12—A middleman known in the investment community as a nominee or custodian.
- 13—A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
• Interest and dividend payments	All exempt payees except for 7.
• Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
• Barter exchange transactions and patronage dividends	Exempt payees 1 through 4.
• Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5. ²
• Payments made in settlement of payment card or third-party network transactions	Exempt payees 1 through 4.

¹ See Form 1099-MISC, Miscellaneous Information, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) entered on the line for a FATCA exemption code.

A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37).

B—The United States or any of its agencies or instrumentalities.

C—A state, the District of Columbia, a U.S. commonwealth or territory, or any of their political subdivisions or instrumentalities.

D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i).

E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i).

F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state.

G—A real estate investment trust.

H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940.

I—A common trust fund as defined in section 584(a).

J—A bank as defined in section 581.

K—A broker.

L—A trust exempt from tax under section 664 or described in section 4947(a)(1).

M—A tax-exempt trust under a section 403(b) plan or section 457(g) plan.

Note: You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns. If this address differs from the one the requester already has on file, enter "NEW" at the top. If a new address is provided, there is still a chance the old address will be used until the payor changes your address in their records.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have, and are not eligible to get, an SSN, your TIN is your IRS ITIN. Enter it in the entry space for the Social security number. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN.

If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's SSN (or EIN, if the owner has one). If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note: See *What Name and Number To Give the Requester*, later, for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.SSA.gov. You may also get this form by calling 800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/EIN. Go to www.irs.gov/Forms to view, download, or print Form W-7 and/or Form SS-4. Or, you can go to www.irs.gov/OrderForms to place an order and have Form W-7 and/or Form SS-4 mailed to you within 15 business days.

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and enter "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, you will generally have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note: Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon. See also *Establishing U.S. status for purposes of chapter 3 and chapter 4 withholding*, earlier, for when you may instead be subject to withholding under chapter 3 or 4 of the Code.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if item 1, 4, or 5 below indicates otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code*, earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third-party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), ABL accounts (under section 529A), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account) other than an account maintained by an FFI	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Two or more U.S. persons (joint account maintained by an FFI)	Each holder of the account
4. Custodial account of a minor (Uniform Gift to Minors Act)	The minor ²
5. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
6. Sole proprietorship or disregarded entity owned by an individual	The owner ³
7. Grantor trust filing under Optional Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))**	The grantor*

For this type of account:	Give name and EIN of:
8. Disregarded entity not owned by an individual	The owner
9. A valid trust, estate, or pension trust	Legal entity ⁴
10. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
11. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
12. Partnership or multi-member LLC	The partnership
13. A broker or registered nominee	The broker or nominee
14. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
15. Grantor trust filing Form 1041 or under the Optional Filing Method 2, requiring Form 1099 (see Regulations section 1.671-4(b)(2)(i)(B))**	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name on line 1, and enter your business or DBA name, if any, on line 2. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)

* **Note:** The grantor must also provide a Form W-9 to the trustee of the trust.

** For more information on optional filing methods for grantor trusts, see the Instructions for Form 1041.

Note: If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records From Identity Theft

Identity theft occurs when someone uses your personal information, such as your name, SSN, or other identifying information, without your permission to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax return preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity, or a questionable credit report, contact the IRS Identity Theft Hotline at 800-908-4490 or submit Form 14039.

For more information, see Pub. 5027, Identity Theft Information for Taxpayers.

Victims of identity theft who are experiencing economic harm or a systemic problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 877-777-4778 or TTY/TDD 800-829-4059.

Protect yourself from suspicious emails or phishing schemes.

Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 800-366-4484. You can forward suspicious emails to the Federal Trade Commission at spam@uce.gov or report them at www.ftc.gov/complaint. You can contact the FTC at www.ftc.gov/idtheft or 877-IDTHEFT (877-438-4338). If you have been the victim of identity theft, see www.IdentityTheft.gov and Pub. 5027.

Go to www.irs.gov/IdentityTheft to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their laws. The information may also be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payors must generally withhold a percentage of taxable interest, dividends, and certain other payments to a payee who does not give a TIN to the payor. Certain penalties may also apply for providing false or fraudulent information.

Carroll Electric Cooperative Corporation

Project Information Form

To be completed by CECC personnel. For informational purposes only.

- Deposits and Fees

	Fee Description	200-Amp Service**	Each Additional Meter Base at Same Location
Standard Fees	Membership Fee	\$ 25.00	\$ -
	Service Deposit*	To Be Determined	To Be Determined
Hook-Up Fees	New Service Application Fee	\$ 80.00	\$ 55.00
	New Service Meter Installation Fee	\$ 50.00	\$ 50.00
	New Service Meter Base Hook Up/Wiring Fee	\$ 100.00	\$ 100.00
	Optional Meter Base Package	\$ 787.31	\$ 787.31

NOTE - Additional construction costs may apply if meter is set for a non-qualified load (e.g., shop building, boat dock, gate, or other structures not deemed permanent).

* Service Deposits are based on projected usage or business type. In lieu of a cash deposit, the customer can provide a surety bond or an irrevocable letter of credit.

** 400-amp Service also available

- Structure Information

- If known, what is the anticipated electric load? _____
 - What is the total square footage? _____
- Electric only
 Propane/Natural Gas
 Renewable (Solar/Wind)

- Will construction consist of underground or overhead (if known)?

- Underground
 Overhead
- *Member is aware of additional construction costs for UG and/or over-distance line extension, if applicable.*

- Are there any existing facilities to be relocated?

- Yes
 No
- *Member is aware of additional costs for relocating existing facilities*

- What is the type of service:
 - Qualified Non-Qualified
 - If Qualified, have requirements been met?
 - Foundation Pressurized Water Approved Sewage Disposal Installed
- Contribution-In-Aid Cost of \$_____ has been paid?
 - Yes No N/A
- Temporary if Non-Qualified, has Temporary cost of \$_____ been paid?
 - Yes No N/A
- Temporary agreement signed?
 - Yes No N/A
- Easement, this includes a continuation/exit from proposed property as well as all other properties involved. The total number of easements required is _____.
 - Yes No N/A
 - Rural (60 feet) Urban (30 feet) Underground (15 feet)
- Future construction plans for additional buildings. Yes No N/A
- Location of meter:
 - Pedestal Building/House
- Permits and inspections: obtained/performed
 - Yes No N/A
- Ditches properly excavated and backfilled and inspection done by a CECC Representative?
 - Yes No N/A
- Conduit termination points fit within the Cable Template (*underground transformers*)?
 - Yes No N/A
- Riser properly oriented on pole with appropriately sized slip joints and standoffs?
 - Yes No N/A
- Installation instructions.
 - The final location for the point of delivery will be at the discretion of the Cooperative.
 - **Prior to construction** contact your Field Service Representative for all applicable CECC specifications and drawings.

See the enclosed Local Contact Information page for permits and/or waivers (where applicable). Other permits or certifications may be required.

Please consult with your Field Service Representative for all requirements.

Local Contact Information

Inspection/Permits:

It is the member/consumer's responsibility to acquire any and all applicable state and local permits and/or their associated inspections. CECC will not supply power to the point of delivery without such notification from the local governing authorities. A list of authorities, their contact information, and jurisdiction has been provided for your convenience.

Arkansas One-Call	811
Missouri One-Call	811
Barry County Health Dept. or waiver	417-847-2114
Benton County 911 Address	479-271-1085
Benton County	479-271-1003
Carroll County 911 Address	870-423-6400 <i>OR</i> 870-423-2388
Stone County	417-357-8402
City of Bella Vista	479-855-8080
City of Bentonville	479-271-3125
City of Berryville	870-423-2335
City of Bethel Heights	479-255-1659
City of Cave Springs	479-248-1040
City of Centerton	479-795-2750
City of Highfill	479-736-5711
City of Little Flock	479-636-2081
City of Lost Bridge Village	479-359-3204
City of Lowell	479-770-2185
City of Pea Ridge	479-451-1424
City of Rogers	479-621-1100
City of Siloam Springs	479-524-3777
City of Springdale	479-750-8154

Carroll Electric Cooperative Corporation

Meter Base Package

Release Form

I, a representative of the undersigned company, hereby acknowledge I will receive a meter base package(s), from time to time, for homes which my company constructs. I accept full ownership of the following described materials from *Carroll Electric Cooperative Corporation* (the "Cooperative") upon the following terms and conditions:

- 1) A service order and charge will be created for each account I wish to purchase a meter base package. I understand payment of each meter base package constitutes my acceptance of this release for each account.
- 2) Upon installation by the Cooperative, I assume full responsibility and control of all material(s) obtained hereunder. Any costs for repair, replacement, or removal of the material(s) shall be at my expense. I understand that a licensed electrician should be the only party who repairs, replaces, or removes the materials. If the materials are installed in an area where an official inspection is required by any government agency, or any county, city, or other controlling entity, I agree that I am completely responsible for having the materials and/or installation inspected by an appropriate expert. The Cooperative will work with all local inspection offices to ensure a proper installation.
- 3) I agree to indemnify and save and hold the Cooperative harmless from any liability from any cause whatsoever that might be claimed by me, any subsequent owner, or any person or entity, claiming damages by virtue of or in any manner arising out of a defect in the material(s), the use or condition of the material(s), or any other function or circumstances relating to the material(s). In the event any legal action is brought against the Cooperative by any party for any reason regarding a defect in the material(s), the use or condition of the material(s), or any other function or circumstances relating to the material(s), the undersigned agrees to reimburse the Cooperative for any and all costs, charges, expenses, judgments, or otherwise, together with its attorney's fees and costs, to investigate and/or defend such claims.
- 4) I agree that the Cooperative shall not be held liable by me or any other party for any losses, damages, penalties, or expenses for any delay in delivery, including any delay at any point in the supply chain, of the materials referenced herein. If for any reason, the quantities of any materials available to the Cooperative are less than the Cooperative's total needs, the Cooperative may allocate its available supply of products among its existing or prospective purchasers and/or itself, for any use whatsoever, in such manner the Cooperative deems proper in the Cooperative's sole discretion, without thereby incurring liability on account of the method of allocation or its implementation. In no event shall the Cooperative be liable for any incidental, consequential, indirect, statutory, special, exemplary or punitive damages, including, but not limited to, lost profits, loss of use, loss of time, shutdown or slowdown costs, inconvenience, lost business opportunities, damage to goodwill or reputation, or other economic loss, regardless of whether such liability is based on breach of contract, tort, strict liability or otherwise, and even if advised of the possibility of such damages or such damages could have been reasonably foreseen. The liability of the Cooperative, and my sole and exclusive remedy for damages for any claim of any kind whatsoever under this agreement, regardless of legal theory, shall not be greater than the actual purchase price of those materials with respect to which such claim is made. I further agree that it is my sole obligation and responsibility to make inquiries as to the availability of said materials well in advance of my need for those materials and that the Cooperative is under no obligation, whatsoever, to alert me that it does not, or will not, have the materials requested herein at such time as they are needed, nor does the Cooperative have any duty to alert me to any delays it may encounter or has encountered in obtaining the materials.

Company Name

Representative's Printed Name

Account Number, if known

Representative's Signature

Date

ACKNOWLEDGED:
Carroll Electric Cooperative Corporation

By: _____