



**Laclede Electric Cooperative**  
**Lebanon, Missouri**

DOC NO:	_____ 01 _____
MAP LOCATION:	_____
LAST NAME:	_____
FIRST NAME:	_____
MIDDLE NAME:	_____
GENERATION:	_____

**AGREEMENT FOR UNMETERED AUTOMATIC DUSK TO DAWN LIGHTING SERVICE**

The undersigned (hereafter called the Applicant) hereby applies to Laclede Electric Cooperative for unmetered dusk to dawn lighting service upon the following terms and conditions:

The Cooperative agrees to provide and maintain, on the Applicant's premises at an agreed location, a pole mounted light including lighting fixture equipped with automatic dusk to dawn switching, wiring circuit, lamp and other equipment necessary to the operation and maintenance of same. Maintenance and replacement of equipment will not be considered an emergency and will be repaired only during regular working hours when other maintenance procedures are scheduled for your area.

The Cooperative agrees to provide on an approved pole the following light(s):

No. \_\_\_\_\_ 9500 Lumens \$7.45 each per month (100 watts)

No. \_\_\_\_\_ 16000 Lumens \$9.60 each per month (150 watts)

The Applicant agrees to pay an installation charge of \$40 for each light provided, including up to 100 feet of secondary service extension. Any additional secondary beyond the 100 feet allowance will be charged at the rate of \$1.00 per foot. Cooperative reserves the right to make other use of the extension provided for the applicant without refund. If a pole, or poles, is necessary to provide service for a light, the installation charge is \$200 per pole in addition to the basic installation charge.

It is expressly understood that the pole and all appurtenances provided by the Cooperative for the above service remains the property of the Cooperative and that no attachments may be made thereto. It is also understood that no connections to or extensions of the circuit serving the unmetered light or lights may be made by or on behalf of the Applicant.

It is further agreed that the Applicant will be responsible for the cost of replacing (material only) damaged and/or destroyed by vandalism, and that the Cooperative may at its own discretion and at any time remove the equipment installed if the Applicant fails to make such payment within a reasonable time.

Payment for service under this agreement is subject to all rules and regulations of the Cooperative. Monthly charges may be adjusted subject to any general rate increase approved by the Board of Directors.

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APPLICANT: _____	<u>NEW INSTALLATION</u>
BY: _____	Place on Meter Pole _____
ADDRESS: _____	Place on Transformer Pole _____
_____	Set New Pole _____
_____	Other _____
TELEPHONE: _____	Paid \$ _____ Date _____
ACCOUNT CHANGE _____ NEW INSTALLATION _____	Rec'd By _____ W.O.# _____
FROM: _____	Date Installed _____
ORDER TAKEN BY: _____ DATE _____	Installed By: _____
MAP NO.: _____	SPECIAL INFORMATION: _____
A/C # _____ METER # _____	_____