

Eau Claire Energy Cooperative

Your Touchstone Energy® Partner



SAFETY FIRST FARM REWIRING GRANT & LOAN APPLICATION

Member Name _____ **Date** _____

Address _____

City/State/Zip _____

Phone _____ e-mail address _____

Joint Member Name _____

Address _____

City/State/Zip _____

Phone _____ e-mail address _____

ECEC Account Number _____

ECEC Location Number _____

Project Information

Description of farm re-wiring project to be financed:

Total estimated cost of project \$ _____ Service voltage _____

Amount requested as Grant \$ _____ Service size in amperes _____

Amount to be financed \$ _____ Check one: Single Phase _____ Three Phase _____

Work being done by (company and/or person) _____

Master Electrician Certification Number _____

Work inspected by (company and/or person) _____

Master Electrician Certification Number _____

or State Inspector Number _____

At owner's convenience, Eau Claire Energy Cooperative will provide the inspector.

Credit Information

Checking

Financial Institution _____ Phone _____
Address _____
City/State/Zip _____

Savings

Financial Institution _____ Phone _____
Address _____
City/State/Zip _____

Loan

Financial Institution _____ Loan Officer _____
Address _____ Phone _____
City/State/Zip _____

Loan

Financial Institution _____ Loan Officer _____
Address _____ Phone _____
City/State/Zip _____

(INCLUDE ADDITIONAL CREDIT INFORMATION ON A SEPARATE SHEET OF PAPER.)

All funds will be made payable to the applicant/owner of the rewired premises upon receipt of a signed lien waiver from all labor and materials suppliers. This is only an application. Final grant/loan documents will be prepared by the cooperative's attorney for execution.

Member Signature _____ Date _____

Joint Member Signature _____ Date _____

For Office Use Only

ECEC Employee assigned to project _____

LOAN AMOUNT APPROVED \$ _____ DENIED _____

AMOUNT FINANCED \$ _____

TERM (LENGTH OF TIME) _____

INTEREST RATE _____

MONTHLY PAYMENT \$ _____

OTHER APPROVAL CONDITIONS _____

FUNDING BREAKDOWN

TOTAL PROJECT COSTS _____

AMOUNT OF GRANT (IF ANY) \$ _____

ALL GRANT APPLICATIONS WILL BE SENT TO THE WISCONSIN ELECTRIC COOPERATIVE ASSOCIATION BOARD OF DIRECTORS FOR REVIEW AND APPROVAL.

EAU CLAIRE ENERGY COOPERATIVE

APPROVAL SIGNATURE _____ DATE _____