MidAmerican ENERGY
OBSESSIVELY, RELENTLESSLY AT YOUR SERVICE®

8/22/17

SOUTH DAKOTA FARM TAP SERVICE PRELIMINARY APPLICATION

Name: _____ *First MI Last* Previous Name (s): _____ SSN: _____ DOB: ___/___/____ Home Phone: _____ Cell Phone: _____ Email: _____	Spouse, if applicable: _____ *First MI Last* Previous Name (s): _____ SSN: _____ DOB: ___/___/____ Home Phone: _____ Cell Phone: _____ Email: _____

Fill out information listed below if the billing should be generated for a commercial entity. If no information is provided the bills will generate for the personal information listed above.

Legal Business Name: _____

Organized As: _____ Federal Tax ID (EIN#): _____

Phone: _____ Alt Phone: _____

Email: _____ State Organized: _____

Officers/Co-Owners

Name:_____ Title: _____ Phone: _____

Name:_____ Title: _____ Phone: _____

If wish to provide additional officers attach a list including the above information for each officer

Start of Service: January 1, 2018

Property Address: _____ Apt/Lot/Suite: _____

City: _____ County: _____ State: _____ Zip: _____

Mailing Address: _____ Apt/Lot/Suite: _____

If different from property address

City: _____ County: _____ State: _____ Zip: _____

Emergency Contact: _____ Phone: _____

Building Type:
check all that apply

Single - Family _____ Farm/Rural _____

Outbuilding/Garage_____ Other (description) _____

Buying/Own: _____ Renting: _____ Landlord Name & Phone: _____

Please indicate what equipment the meter serves, e.g. furnace, water heater, dryer, etc._____

Declining Service: _____ (initial)

By initialing the box above, you are indicating that you do not wish to continue natural gas service at the above location.

The undersigned herby agrees to comply with the rules and regulations of the Company, the Company's tariffs on file with the State Public Utility Commission, and the rules of the State Public Utility Commission. This application will be converted to a final application (from a preliminary one) upon Customer's completion of a Safety and Repair/Replacement Contract that will be filed and approved by the South Dakota Public Utilities Commission. This Contract will address the customer's responsibility for a portion of the required safety inspections and responsibility for the cost of any repairs or replacements done by MidAmerican Energy.

Signature: _____

Print Name: _____

Date: _____