## **APPLICATION FOR ELECTRIC SERVICE**

I,, confirm	by signing this notarized document that I	wish to take
responsibility for electric service at		, under
	(Number/Road/Street & City/Town)	
Central Maine Power account #	on this date	
I can be reached at the following for any que	stions:	
Phone:		
Email:		
Have you lived at and had electric service at	this location before? (Yes or No)	<del>.</del>
<ul> <li>I understand that a Central Maine Power the history of service at this location.</li> <li>I understand that the representative will deemed necessary prior to establishing the service of the se</li></ul>	liscuss with me any other conditions of se	
Applicant's Name (please print):		
Applicant's Signature:		
**************************************	**************************************	********
Form of ID provided:	Issue date of ID:	
Address on customer's form of ID:		
City/State:		
Before me personally appearedsays that the statements set forth above are	who by me being dutrue and correct.	uly sworn upon oath,
Subscribed and sworn to before me this	day of(montl	n),(year)
Signature of Notary Public		
Name of Notary (PRINTED):		
County of:	My Commission Expires on	/ /

Please return this form to Central Maine Power Company by email to **AOS@cmpco.com**.

Please include "Application for Service" in the subject line. Thank you.