



PO Box 39, Lutsen MN 55612-0039

PLEASE COMPLETE THE FOLLOWING:

Date you are responsible for electric is: \_\_\_\_\_

Selling?  yes  no

Renting?  yes  no

Seller's / Landlord's Name: \_\_\_\_\_

Renter / Purchaser Name: \_\_\_\_\_

**RENTER'S NOTE:** AECI requires a **\$100 surety deposit** or a letter of credit from a previous utility company before we can transfer the electric service into your name.

**Head of Household:** \_\_\_\_\_  
(Print Name)

Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Social Security #: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Full-time Residence Phone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Work Phone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ ext #: \_\_\_\_\_

Cell #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Cook County Seasonal Phone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

**Significant Other:** \_\_\_\_\_  
(Print Name)

Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Social Security #: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Work Phone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ ext #: \_\_\_\_\_

Cell #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Cook County Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

