

Application for EnergyWise Electric Heat



Service availability monthly charge is \$47.00
General Service energy rate is \$.1270/kWh
Summer (June-August) energy rate is \$.1420/kWh

This Agreement made and executed the _____ day of _____, 2018 by **Arrowhead Electric Cooperative Inc (AECI)** and _____.

(Please PRINT Member's name)

This contract must be FULLY COMPLETED PRIOR to any heat or subtract meter BEING ENERGIZED. No changes from General Service or Summer electric rates may be enforce without a completed and accepted agreement by Arrowhead Cooperative.

Member agrees to participate in one of the following **Dual Meter** Electric Thermal Storage (ETS) Program (**choose only one**)

- # 1 ETS Water @ \$.0515/kwh:** The Member's electric water heater(s) must comply with AECI rules (85 gallon minimum). ETS water heating is controlled 16 hours daily (charging only 8 hours in a 24 hour period).
- # 2 ETS Heat @ \$.0515/kwh:** The Member's electric space heating system(s) must be sized appropriately and be capable of delivering heat to the entire structure on only 8 hours of daily charge time. ETS space heating is controlled 16 hours daily (charging only 8 hours in a 24 hour period).
- # 3 ETS Heat and Water @ \$.0515/kwh:** Combination of BOTH ETS Water and Heat as listed above.

Rates subject to change based on latest applicable rate schedule and are subject to change or may be discontinued at any time without notice as approved by the AECI board of directors.

Note: ETS space heating system are required to provide your entire home's heating requirements through the storage of heat energy produced electrically during AECI's off-peak charge period(s) – typically overnight. Please take caution and care in the sizing of your individual space heating and water heating needs. Please remember that all households have differing heating and hot water needs, the system owner is responsible for properly sizing your space heat and water heating infrastructure.

I, the undersigned Member, hereby certify to AECI that the ETS space and/or water heating system(s) installed are sized properly for the entire heating load for the electric service at the following property address:

Service Address: _____.

I, the undersigned Member, further agree that if the space heating system(s), for the above described property address, does not provide ample heat energy to completely heat my home during any portion of the day, that AECI shall not be liable and shall be held harmless for any economic loss, personal injury, or property loss that results. In continuance, I agree to that AECI is not be liable and shall be held harmless for any economic loss, personal injury, or property loss that results due to the unsatisfactory operation, malfunction, or inadequate storage capacity of the member owned ETS space or water heating system.

Return completed agreement to Arrowhead Cooperative, attention Member Services.

Minimum program participation of three years required, noncompliance may preclude this service from being available to the member for other EnergyWise heating programs now or in the future. Member agrees to allow the Cooperative to inspect the installation and operation of the and load management device at all reasonable hours.

By: _____
(Member's Signature)

Date: _____
(Today's date)

*****Electrician to complete boxed information below*****

Load: <input type="checkbox"/> Heat _____ kW, Model _____	<input type="checkbox"/> Water Htr _____ kW, _____ gals	
Socket: <input type="checkbox"/> 100 amp socket	<input type="checkbox"/> 400 amp socket (CT)	<input type="checkbox"/> Pole mount
<input type="checkbox"/> 200 amp socket	<input type="checkbox"/> other _____ (CT)	<input type="checkbox"/> Pedestal
Meter: <input type="checkbox"/> Subtract Heat, subtracts from general service meter (electrician will install <input type="checkbox"/> yes or <input type="checkbox"/> no)		
<input type="checkbox"/> Primary Heat, (linemen will install & connect to transformer / \$150.00 connection fee)		
Electrician: _____	Ph # _____	
LM Device Activation Date: _____		
AECI Acceptance: _____	Initials _____	Date _____