

Main Office (406) 883-7900  
or (406) 675-7900  
Office Fax (406) 883-7919  
Warehouse Fax (406) 883-7923  
Hot Springs Svc. Ctr. (406) 741-3402



**MISSION VALLEY POWER**

Post Office Box 97 \* 36079 Pablo West Road \* Pablo, MT 59855-0097



Out of Acct. \_\_\_\_\_  
Request Date: \_\_\_\_\_

Service Order No. \_\_\_\_\_

**ELECTRICAL SERVICE CONTRACT  
For Area/Security Light**

OMB 1076-0021  
**October 2011**

Meter No. \_\_\_\_\_ Stop No. \_\_\_\_\_  
Location No. \_\_\_\_\_

Name/Address Code: \_\_\_\_\_  
Account No. \_\_\_\_\_  
Work Order No. \_\_\_\_\_

The undersigned, \_\_\_\_\_ (“Applicant”),  
whose mailing address and telephone number are \_\_\_\_\_

(\_\_\_\_\_) \_\_\_\_\_, and whose **Social Security Number or Business ID Number** is \_\_\_\_\_  
hereby agrees to enter into a contract with Mission Valley Power (“MVP”) on the following terms and  
conditions.

1. Applicant certifies that he/she is the \_\_\_\_\_ of property located at  
(Owner/Lessee/Renter, Etc.)  
(physical address) \_\_\_\_\_

2. Security Deposit: \$ \_\_\_\_\_ Deposit Transferred from Location Number \_\_\_\_\_  
Credit Reference History: \_\_\_\_\_

3. General Connect/Transfer Fee or Reconnect Fee: \$ \_\_\_\_\_ To be billed on first month’s bill \_\_\_\_\_

4. Rate Schedule.

**(a) Existing Area/Security Light**

**Monthly Rate**

_____ 100 watt H.P.S.	\$ 9.07
_____ 200 watt, H.P.S.	\$12.14

**(b) New Area/Security Light Installed with new Pole**

Customer is responsible for actual cost of new pole.

Customer agrees to pay for area/security lighting service for a minimum period of three

(3) years at the monthly rate specified above.

**Total Monthly Charge: \$ \_\_\_\_\_**

