

Main Office (406) 883-7900

Warehouse Fax (406) 883-7923



FOR MVP USE

Out of Acct. _____ Work Order No. _____
 Service Loc.# _____
 Location No. _____ Bill Run _____ Stop _____ Service Order No. _____
 Area Light _____

ELECTRICAL SERVICE CONTRACT

In accordance with Federal guidelines we need a copy of the applicant(s) **photo ID**

Service request Date: _____

Meter No. _____

Account No. _____

Business name: _____

mailing address, city, state & zip: _____

Hereby agrees to enter a contract with Mission Valley Power (“MVP”) on the following terms and conditions.

1. Applicant certifies that he/she is, **(Circle one): Owner, Renter/Lessee, Manager** of property located at: **physical address for this service** _____
2. **Security Deposit: \$500.00 or Excellent Credit Reference from current Elec. Utility for the last 12 months of service OR prepay for \$60 (must fill out prepay agreement)** _____
3. General Connect/Transfer Fee or Reconnect Fee: **\$10.00** will be billed on first month’s bill.

4. Rate schedule services

- _____ Existing Area Light
- _____ Residential Basic Charge of \$17.50/mo., \$21.00/mo. for Prepay, Net Meters \$20.00 mo.
- _____ Small General Services Basic Charge of \$17.50/mo., \$21.00/mo. for Prepay, Net Meters \$20.00
- _____ Large General Services Single-Phase Basic Charge is \$32.50/mo.
- _____ Large General Services Three-Phase Basic Charge is \$53.25/mo., Net Meters \$50.00 mo.
- _____ Unmetered Services using kilowatt hours (UMS) Basic Charge is \$17.50/mo.
(Includes traffic lights, billboards, etc)
- _____ Large Commercial Basic Charge is \$153.83/mo.
- _____ Irrigation Basic Charge of \$5.00/Mo

Basic Charge applies to services that are billed with or without a meter

The Applicant consents to be bound by all the terms, conditions, fees and charges set forth above, by all provisions contained in MVP’s Operations Manual and federal regulations found at 25 C.F.R. Part 175 (including any revisions to the manual or regulations), and by applicable rate and fee schedules (that may change from time to time) available for review at MVP’s Pablo office.

PLEASE TURN OVER

Name of Business (PLEASE PRINT)

By: _____
Officer of Business (PLEASE PRINT)

_____ Date

Signature of Business Officer (Authorized to Contract on Behalf of Business)

The Confederated Salish and Kootenai Tribes operate and manage the Bureau of Indian Affairs' Flathead Agency Power division under the name "Mission Valley Power" pursuant to a contract authorized under the Indian Education and Self-Determination Act (25 U.S.C. 450f). MVP maintains its system records consistent with the federal Privacy Act (43 CFR Part 2, Subpart D). This information is being collected to determine the consumers' electrical needs and will be used to determine consumption costs. Response to this request is required to obtain a benefit in accordance with 25 CFR 175. Failure to provide all or part of this information may preclude MVP from providing requested service

Business Name _____

Accounts Payable Contact _____

Business Manager or Owner _____

Business Phone _____

Federal Id # _____

Email Address _____

I would like to use my E-mail address to receive outage notifications. ()

