

- Electric + Fiber
- Electric Only
- Fiber Only

**ORANGE  
COUNTY  
REMC**



**ORANGE  
COUNTY  
FIBER**

PO Box 208  
Orleans, IN 47452  
www.myremc.coop

## Member Application for Electric & Fiber

For Office Use

Map Location \_\_\_\_\_  
Elec Acct # \_\_\_\_\_  
Fiber Acct # \_\_\_\_\_

- I would like to connect a security light.
- I would like to enroll in SmartHub.
- I would like to enroll in paperless billing.

### ACCOUNT INFORMATION

**Applicant's Name** \_\_\_\_\_  
DOB \_\_\_\_\_ Cell # \_\_\_\_\_ Other # \_\_\_\_\_  
Email Address \_\_\_\_\_ Employer \_\_\_\_\_  
SSN/Tax ID# \_\_\_\_\_ Driver's License # \_\_\_\_\_

**Co-Applicant's Name** \_\_\_\_\_  
DOB \_\_\_\_\_ Cell # \_\_\_\_\_ Other # \_\_\_\_\_  
Email Address \_\_\_\_\_ Employer \_\_\_\_\_  
SSN/Tax ID# \_\_\_\_\_ Driver's License # \_\_\_\_\_

**Please enroll me in Operation Round Up.** Each month, members who wish to participate in Operation Round Up can have their electric and/or fiber bill automatically rounded to the next highest dollar. The cost to you will be less than a dollar a month and will average about \$6.00 a year. Grants have been awarded to local libraries, senior scholarships, schools, police departments, churches, and other organizations with our member's round up contributions. View the full dispersement list on our website.

### SERVICE INFORMATION

Requested Start Date *(should the date be available)* \_\_\_\_\_

**Service Address** \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Mailing Address** *(if different than location)* \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I own the service location     I rent/lease the service location

**(If you rent, the landlord or property owner must complete the Landlord Tenant approval form to install our fiber service.)**

Landlord's Name \_\_\_\_\_ Landlord's # \_\_\_\_\_

For Office Use

ID \_\_\_\_\_ Bill Cy \_\_\_\_\_ Deposit \_\_\_\_\_ Bd Dist \_\_\_\_\_ Twp \_\_\_\_\_ Geo Code \_\_\_\_\_  
Memb Pd \_\_\_\_\_ Credit % \_\_\_\_\_ Line # \_\_\_\_\_ FSA \_\_\_\_\_  
Air Evac \_\_\_\_\_ OLUe Turned In \_\_\_\_\_ NID \_\_\_\_\_ Shelf \_\_\_\_\_

**Please fill out back page**

## FIBER SERVICE

### Residential Plans

**100/100 Mbps**  
\$54.95/month

**1/1 Gbps**  
\$99.95/month

### Commercial Plans

**50/50 Mbps**  
\$99.95/month

**500/500 Mbps**  
\$229.95/month

**100/100 Mbps**  
\$149.95/month

**1/1 Gbps**  
\$349.95/month

Business packages require 24/7 response and are heavily reliant on connection to operate. All service plans include 1 Static IP address if needed.

### Additional Services

**VoIP (Home Phone)\***  
\$34.95/month

**Static IP**  
\$5.00/month

Do you give REMC consent to install fiber optic lines, equipment and devices at the service location indicated above?

Yes  No

During installation, it may be necessary to penetrate the structure of the residence to install the equipment. Do you give REMC consent to perform this as needed?

Yes  No

#### **\*Please complete for VoIP service**

I choose to keep my current phone number \_\_\_\_\_. I understand this requires porting of my current number which could take 2-4 weeks. I understand this process is determined by my current carrier, not Orange County Fiber.

- Please provide a copy of your bill from your current phone carrier. It is needed in order to port your current phone number.
- VoIP service requires an additional application to be filled out. Please ask a member service representative for the application.

## AGREEMENT

The undersigned hereby requests membership in Orange County REMC. I/we agree to be bound by the Articles of Incorporation, the Bylaws, and amendments thereto, and such rules and regulations may be adopted from time to time by the Board of Directors. All statements are true and complete to the best of my/our knowledge. I/we agree to pay valid bills for Orange County REMC services. If I/we fail to pay for the services, I/we understand that I/we will be responsible for attorney fees and other costs of collection incurred by Orange County REMC equal to 35% of the amount due. If applicant is not already a member, this Agreement shall constitute an application for membership in the Cooperative. By signing the Agreement, member (including both parties to a joint membership) hereby give (s) the Cooperative permission to collect prior credit history for the purpose of determining deposit amount.

Further, I/we agree, in order for Orange County REMC to service this account or to collect any amounts owed, REMC may contact me by telephone at any telephone number associated with this account, including wireless telephone numbers, which could result in charges to me. REMC may also contact me by email using any email address that I may provide. Methods of contact may include using pre-recorded/artificial voice messages and/or use of an automatic dialing device, as applicable.

#### ELECTRIC

The Cooperative shall use reasonable diligence to provide a constant and uninterrupted supply of electric power and energy here under. If the supply of electric power shall fail or be interrupted, or become defective through an act of God, government authority, action of the elements, public enemy, accident, labor trouble, required maintenance work, inability to secure the right-of-way, or any other cause beyond the reasonable control of the Cooperative, the Cooperative shall not be liable therefore or for damages caused thereby.

#### FIBER

The installation date for service at your residence is dependent upon your location and the Orange County Fiber build-out schedule. Signing this agreement does not guarantee the actual installation date. It is your responsibility to take appropriate precautions to secure your own network by installing and maintaining anti-virus and anti-malware software. Orange County Fiber does not assume any responsibility and you are solely responsible for any content stored, accessed, or transmitted using Orange County Fiber broadband internet services. If equipment is damaged or equipment is unreturned an assessed fee will be required.

\_\_\_\_\_ **By initialing here,** I understand my first fiber statement will be larger due to the month in advance proration for partial days during the installation month.

\_\_\_\_\_ **By initialing here,** I understand if my past due is not paid by the established cutoff date, my service will be disconnected which will result in a \$50.00 fiber reconnection fee and an electric deposit in addition to the monthly charge.

BY EXECUTING BELOW, YOU UNDERSTAND AND AGREE WITH ALL TERMS AND CONDITIONS CONTAINED IN THIS WORK ORDER AND ACKNOWLEDGE THAT THE TERMS AND CONDITIONS AND THE ACCEPTABLE USE POLICY CAN BE FOUND ON [WWW.MYREMC.COOP/INTERNET](http://WWW.MYREMC.COOP/INTERNET) OR AVAILABLE UPON REQUEST.

The following question is optional. Do you consider yourself to have racial or ethnic minority status?  Yes  No  
If you answered yes, of what call do you consider yourself? \_\_\_\_\_

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Co-Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*This institution is an equal opportunity provider and employer.*