



4815 E. Highway 54
El Dorado Springs, Missouri 64744
800-876-2701
Fax: 417-876-5368

Prepaid Service Agreement

Applicant: _____ Account #: _____
Notification Balance: _____ Outstanding Balance Applied: _____
E-Mail: _____ Contact Landline Telephone #: _____
Contact Wireless Telephone #: _____

The undersigned (hereinafter called the "Member") hereby applies for participation in the Prepaid Program offered to Members of Sac Osage Electric Cooperative (hereinafter called the "Cooperative") and agrees with the Cooperative to the following terms and conditions:

1. The Member shall purchase electric energy from the Cooperative in accordance with the present and any future rate schedule of the Cooperative on a prepaid basis for the above referenced account. The daily billing amount may be estimated until the monthly billing process brings all charges in line with the appropriate rate schedule.
2. The Member understands that the terms and conditions set forth in the Member's Application For Membership and for Electric Service continue to apply in addition to the terms and conditions of this Prepaid Service Agreement, subject, however, to any changes set forth in this Agreement.
3. The Member shall pay any applicable fees established by the Cooperative Bylaws and the policies, rules and regulations of the Board of Directors as may be required for the Member to participate in the Prepaid Program.
4. The Member authorizes the Cooperative to transfer the above outstanding balance from the Member's account with the Cooperative to the prepaid account and further agrees that fifty percent (50%) of any payments made on this account in the future shall be applied to the outstanding balance until any unpaid balance is paid in full.
5. If the account is currently disconnected for non-payment before commencement of participation in the Prepaid Program, a minimum payment of \$100 will be required for reconnection. Fifty percent will be applied to the outstanding balance and fifty percent to the prepaid balance.
6. Any deposit fee previously paid by the Member to the Cooperative will be applied to the Member's outstanding balance at the commencement of participation in the Prepaid Program and any credit remaining after application of the deposit fee shall be applied to the Member's prepaid account balance.
7. After the prepaid account is established a minimum payment of \$10.00 must be applied to the account when submitting a payment.
8. As a result of participation in the Prepaid Program, the Member will not be mailed a monthly statement for electric usage or other applicable fees or charges.
9. The Member shall be responsible to regularly monitor the balance on the prepaid account and understands that electric service will be subject to disconnection without any written notification from the Cooperative to the Member once the balance of the account reaches zero (\$0.00).
10. Services will be reconnected only after funds have been received and posted to the prepaid account. Reconnection of service can only be ensured if payments are made during the business hours of Monday through Friday, 7:00AM -11:30AM. Any failed attempt by the Member to reconnect after normal business hours will be resolved the next business day.
11. **Services that remain disconnected for a period longer than 30 days shall require the member to contact the office during normal business hours to reinstate service.**
12. The Member shall pay any return payment fees and service fees and further agrees that all such applicable fees will be applied to the prepaid account.



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13. The Member understands the medical and health conditions of any person located at the address where electric service is furnished by Cooperative and will not postpone disconnection of electric service.
14. Prepaid accounts shall not be eligible for payment arrangements with the Cooperative.
15. If a Member changes any of the contact information (i.e. email address, phone number) provided on this agreement, it is the responsibility of the Member to notify the Cooperative of any such changes immediately.
16. LIHEAP Assistance may be applied to a prepaid account when the Cooperative receives notification on the Missouri DSS – Family Support Division’s Customer Eligibility Listing stating that an entitled member has been pledged aid.
17. The Cooperative reserves the right to remove any Member from prepaid at any time, without consent or notification. The Cooperative reserves the right to modify or end this program at any time.
18. If a Member wishes to disconnect service the Member shall be refunded any balance on the prepaid account.
19. I do hereby expressly give my consent for the Cooperative to send prerecorded automated notifications, including both voice-mail and text, and other business related information to any landline or wireless number listed on this form, or to any other phone number(s) retained by the Cooperative’s computer, whether a landline or wireless number. I understand that my wireless service provider may charge me an additional fee for receiving such calls. I further agree to notify the Cooperative immediately upon my discontinuance of the use of any of the contact numbers listed above, and to advise the Cooperative of any new contact number(s) that I have for the Cooperative’s use. I further understand that I have the right to revoke this consent at any time by notifying the Cooperative of such revocation, or to “opt out” of receiving such calls.
20. I have read the Prepaid Service Agreement and accept the terms and conditions of the agreement.

Signature: _____

Printed Name: _____

Date: _____