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**SECURITY LIGHT INSTALLATION**

Account No. \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Date Installed \_\_\_\_\_

I, \_\_\_\_\_, agree to the following procedures:

1. The Cooperative will install and maintain normal maintenance on non-metered security light.
2. Maintenance work will be done during scheduled working hours Monday through Friday, excluding holidays.
3. Vandalism will not be considered normal maintenance. This work may be charged to the member.
4. If additional facilities are required for security light installation, labor and materials will be charged to the member.
5. Rental security light installations off the premise will be charged a monthly minimum plus the applicable security light charge. Rental security lights on the premise that require a separate transformer will be charged the additional transformer charge in addition to the security light charge.

The current rate schedule shall apply.

\_\_\_\_ Separate transformer required.

Sign \_\_\_\_\_

Date \_\_\_\_\_