

Processed by:	
Date	
Account #	

Western Cooperative Electric
P.O.Box 278 635 S.13th Street
WaKeeney, KS 67672
1-800-456-6720 1-785-743-5561
www.westerncoop.com



PrePay POWER

I agree to purchase electric service from Western Cooperative Electric Association Inc.(Western), under its optional billing plan, PrePay POWER, and agree to be bound by its rules and regulations, as they are now in effect and may hereafter be amended.

I agree to make an initial payment of \$50.00 or more toward my PrePay POWER account for future electric use.

I understand taxes, franchise fees, the energy charge adjustment and pro rata shares of monthly charges shall be levied against my account daily, in addition to daily energy charges. Once monthly, a billing true-up will occur on my account. This consists of a reconciliation for daily estimation of charges to actual monthly charges with the current energy charge adjustment and will adjust my account balance as necessary. The true-up could result in an extremely high or low daily bill amount.

It is my responsibility to notify Western when I choose to close the account. Pro rata shares of various monthly charges shall continue to be charged to my PrePay POWER account daily, even when there is no energy use, and I will be responsible for all charges until the account is closed and finalized.

I understand I will not receive paper billing statements or disconnect notices with a PrePay POWER billing plan. Information regarding my account will be available via Western's payment web portal at westerncoop.smarthub.coop, or the SmartHub app. I am responsible for customizing my preferred notification methods on the web portal or app. Any notice from Western, required hereunder, shall be pursuant to the preferred method(s) of notification I specify. As such, I understand it is my sole responsibility to notify Western immediately of any changes to my contact information or account.

Member initial: _____

I understand that should my balance reach \$0.00 or less and payment is not made, my electric service will automatically be disconnected during Western's designated disconnection period in accordance with Western's rules and regulations. Upon disconnection, I understand if I, or a member of my household, have declared to Western the household has a medical necessity, I am completely responsible, and Western has no obligation to reconnect service. I also understand that should I receive financial assistance after my meter has been disconnected, through a help agency or any other financial assistance, the meter will not be reconnected until Western has received the funds and have applied it to my account.

Member initial: _____

It is my responsibility to regularly monitor my account balance. I understand I will receive periodic PrePay POWER notification reminders when my PrePay POWER account reaches a balance of \$25.00 or less, and I can customize my PrePay POWER notifications to meet my personal needs.

If my service is disconnected for any reason, before my service will be reconnected, my account must have a \$50.00 minimum credit balance. I understand I can make real-time payments during normal business hours at Western's main office in WaKeeney, KS, or via the internet or phone. If I do not meet the minimum balance requirements to reconnect my service after 10 days, the account will be closed and finalized. PrePay POWER account plans are not subject to the Cold Weather Rule.

I understand if my PrePay POWER account is discontinued or terminated, Western may transfer any unpaid balance to any other account I may have with Western or refer any unpaid balance to a third-party collection agency. Should you have credit on your account after it is terminated, the credit will be paid out in our normal accounts payable process. To ensure you receive the credit, keep Western informed of your forwarding address. Western reserves the right to take up to one business day to disconnect the meter.

I, the undersigned, hereby release and discharge covenants not to sue and hold harmless Western Cooperative Electric Association Inc., its respective agents, employees, assigns or representatives, from all liability, claims, demands, losses or damages caused in whole or in part by my participation in PrePay POWER. I have read this agreement, fully understand its terms, and understand I surrender substantial rights by signing it. I have signed it freely and without any inducement or assurance of any nature. I intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Name _____ Date _____

Signature: _____