



Deposit Waiver for Center Pivots

Due to the seasonal nature of center pivots, which also creates difficulty in calculating a fair and sufficient deposit, SVEC offers to waive an initial deposit for center pivots to any new consumer-members and those established consumer-members in good standing (those who have made timely payments on all active accounts in their name for at least the previous season). By completing this form and signing below, I am agreeing to the following terms:

_____ I will be operating a center pivot on at least one of the accounts associated with my SVEC membership. Member No.: _____

_____ I would like to have my deposit(s) for all center pivots associated with my SVEC membership waived, and I understand that this waiver only applies to center pivots. I have reviewed the attached list of accounts associated with my SVEC membership and agree that the center pivot account(s) are marked as "Irrigation."

_____ I understand that if I fail to make a timely payment on any of my SVEC accounts, which causes any of them to be subject to disconnect, then (1) all of my SVEC accounts will be subject to disconnect, and (2) I will be responsible for submitting a deposit for all of my SVEC accounts. In other words, if any of my accounts are disconnected for non-payment, then all of my accounts will be disconnected until I submit the required deposit on all of my SVEC accounts. The amount of the deposit for each impacted account will be equivalent to two months of actual usage, as calculated by SVEC.

_____ If I am required to pay a deposit because of my failure to timely pay for electric service, the subsequent deposit(s) collected will not be returned to me even after I remain in good standing for 12 months. Rather, I may apply for a waiver of deposit(s) on new center pivot account(s) after establishing good standing.

_____ I understand that this waiver will remain in effect for the center pivots associated with my below membership number as long as they are active under my membership number, and I qualify for a deposit waiver (i.e., none of my accounts become subject to disconnect).

Name: _____ Member No.: _____

Signature of Consumer-Member

Phone Number

SVEC Internal Use Only

- | | |
|--|--|
| <input type="checkbox"/> New Consumer-Member | <input type="checkbox"/> Established Consumer-Member |
| <input type="checkbox"/> Waiver Granted | <input type="checkbox"/> Waiver Denied |
| Account Check—All accounts in good standing? _____ | |

Date Received: _____

By: _____