

MEMBERSHIP APPLICATION AND AGREEMENT

This represents a request for membership in **Jackson Electric Cooperative, Inc.** (hereinafter referred to as "Cooperative") by the undersigned (hereinafter referred to as "Applicant"). When approved, this shall represent the membership agreement with the Cooperative.

A.

Applicant's signature on this form shall constitute a written request for membership in the Cooperative. Any person, firm, association, corporation, body politic or subdivision thereof is eligible for membership in the Cooperative. However, no entity shall have more than one membership in the Cooperative.

B.

Applicant's request for membership shall be accompanied by a membership fee that is in effect at the time of membership request. Membership fee is subject to adjustment by the Cooperative's Board of Directors from time to time, but Applicant will only pay membership fee in effect at time of request. Membership fee is used to secure membership status in the Cooperative and purchases no stock nor accrues interest. Membership fee is refundable upon termination of membership and compliance with Section F of this agreement.

C.

Acceptance of applicant's membership shall allow member to purchase said service or services as shall be provided to members of the Cooperative. The applicant, by paying a membership fee and becoming a member, assumes no personal responsibility or liability for any debts, or liabilities of the Cooperative, and it is expressly understood that under the law his private property is exempt from execution for any such liability. By executing an agreement for service, applicant shall be bound by the Cooperative's bylaws, policies, rules and tariffs approved by the Cooperative's Board of Directors and/or the Public Utility Commission of Texas and any other governmental agency exercising jurisdiction over said service, as the above may be amended from time to time.

D.

Acceptance of applicant's membership shall allow member all rights and privileges within the Cooperative and the conduct of Cooperative business. The Cooperative shall use the address herein referenced or as may be updated by the member for the purpose of providing legal notice from the Cooperative.

E.

The Applicant grants the Cooperative the necessary rights, privileges, and easement to construct, extend, operate, replace, repair, and perpetually maintain electric utility lines, appurtenant facilities and meters on, over and under the property owned or occupied by the Applicant. Applicant further agrees to provide without cost to the Cooperative any properly signed recordable easements required by the Cooperative for the installation and maintenance of the Cooperative's electric transmission or distribution and appurtenant facilities, existing and future; provided such future lines and facilities shall be located along existing exterior boundary lines and interior fence lines whenever feasible.

F.

Any member may withdraw from membership upon payment in full of all debts and liability owed the Cooperative and upon compliance with such terms and conditions as the Board of Directors may prescribe. A member of the Cooperative may be expelled by an affirmative two-thirds (2/3rds) vote of a quorum of the membership.

G.

Membership may be requested separately by husband or wife or can be maintained jointly by the couple. A joint membership shall entitle a couple only one vote in Cooperative affairs.

It is the policy of this Cooperative that each Member connected to its system have a paid membership fee, connect fee and established credit with an executed membership agreement and executed membership application contract. The membership fee and deposit are refundable upon discontinuing service and the payment of your final electric bill, the connect fee is not refundable.

Cooperative Use

Approval Date: _____

By: _____

James E. Coleman, General Manager
PO Box 1189
Edna, TX 77957-1189

Member Account # Assigned: _____

Applicant Use

Date of Request: _____

First Applicant Name: _____

Applicant Signature: _____

Mailing Address: _____

City, State, Zip: _____

Social Security #: _____

TX D/L or Employee I/D# _____

Second Applicant (if needed for joint account)

Date of Request: _____

Second Applicant Name: _____

Applicant Signature: _____

Mailing Address: _____

City, State, Zip: _____

Social Security #: _____

TX D/L or Employee I/D# _____