

# Change of Ownership Package Checklist

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- Change of Ownership Application (Form 1189)
- Copy of your Driver's License
- Application for Membership and Electrical Service-Residential/General Service
- Membership Application and Agreement
- Contract for Flood Light Installation (optional)
- Bank Draft Authorization for Electric Billing (optional)
- Electric Billing

## Optional forms available for download

After you have completed the checklist, please send the documents via email ([newmember@myjec.coop](mailto:newmember@myjec.coop)), mail, or stop by one of our offices.

Jackson County District  
8925 State Highway 111 South  
Ganado, Texas 77962  
Office: (361)771-4400

Office Hours:  
Monday – Friday  
8am – 5pm



Jackson Electric Cooperative, Inc.

Your Touchstone Energy® Partner 

Matagorda County District  
100 Cooperative Way  
Bay City, Texas 77414  
Office: (979)245-3029

Office Hours:  
Monday – Friday  
8am – 5pm



## Change of Ownership / Owner Authorization for Alternate Electric Service Payee

**1. Disconnect Type:**

Disconnect Only    
  Owner Change Over    
  Landlord Change Over    
  Alternate Electric Service Payee

**2. Current Account Holder/Service Location:**

I request the transfer of electric service to the person in Section 2 on the date indicated. I understand that the action requested on this form may require up to 72 hours to complete. I understand that I will remain financially liable for all electric consumption and charges until service is actually terminated or transferred.

Name:	Account & Meter Number:	Location:
Current Service Address:	City, State, Zip:	
Contact Phone Number:	Effective Date:	

Please forward any outstanding bill or refund to:

New Address:	City, State, Zip
Signature:	Date:

**3. New Account Holder:**

I request the transfer of electric service from the person indicated in Section 1 to me on the effective date indicated in Section 1. I understand that it may take up to 72 hours to complete this action. When service is transferred, I will accept financial liability for all electric consumption and charges. I understand that in order to transfer service, I will be required to complete the Jackson Electric Cooperative application for service, membership application, provide payment of deposit, membership fee and service charge, produce a State Issued Driver's License or State Issued Photo ID and Social Security Card\*, in addition to property ownership documentation (Warranty Deed/Rental Agreement).

Deposits are required for all Electric accounts unless a satisfactory credit rating is obtained through a consumer reporting agency, as defined by the Federal Trade Commission.

**Cooperative Use:**

New Customer Electric Deposit: \$ \_\_\_\_\_ (2x location average)  
 Membership Fee: \$ \_\_\_\_\_  
 Service Charge: \$ \_\_\_\_\_

**New Account Holder Information:**

Name:	DL Number:
Contact Phone Number:	
Signature:	Date:

*Cooperative Use:*  
 Is property new or existing? \_\_\_\_\_  
 Highest kWh (last active 12 months)? \_\_\_\_\_  
 Current rate: \_\_\_\_\_  
 Service District: \_\_\_\_\_ Edna \_\_\_\_\_ Bay City  
 Employee Initials : \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICATION FOR MEMBERSHIP AND ELECTRICAL  
SERVICE-RESIDENTIAL/GENERAL SERVICE**

The undersigned (hereinafter called the "Applicant") hereby applies for membership in and agrees to purchase electric energy from JACKSON ELECTRIC COOPERATIVE, INC., (hereinafter called the "Cooperative") upon the following terms and conditions:

1. The Applicant will pay the Cooperative the sum of \$20.00 which upon acceptance hereof by the Cooperative, shall constitute the membership fee. 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 is expressly understood that under the law his private property is exempt from execution for any such liabilities. Such membership fee shall be refunded to the Applicant upon termination of service providing all amounts due the Cooperative have been paid in full by the Applicant.
2. For each new account the applicant will pay a \$15.00 connect fee.
3. Type of service (Please check one of the boxes)  
 House    Mobile Home    Building    Barn    Water Well    Temp-Pole    RV
4. Rate Schedule: \_\_\_\_\_ attached here to. (General Service / Residential Primary / Residential Secondary)  
**(Cooperative Use)**
5. Bills for service shall be paid at any office of the Cooperative and credited on the Cooperative records at Edna, Texas. Billing shall be in accordance with above reference rate schedule as amended or adjusted by Cooperative Board of Directors and as approved by governing bodies. Member shall adhere to approved tariffs for electrical service.

EXTENSION of MEMBERSHIP SYSTEM: In accordance with the Cooperative Tariffs and Regulations, the extension of electrical service may involve lump sum contribution-in-aid of construction, or monthly contribution in aid of construction, and/or an increased monthly minimum.

In consideration of the enclosed requested extension the Cooperative proposes the following:

1. Non-refundable contribution-in-aid of construction in the sum of \$ N/A , payable upon time of request for construction. This fee is not subject to refund should additional members connect.
2. In accordance with the extension involved, the account shall have a monthly minimum of N/A dollars and be in effect for a minimum of N/A months. The account shall always carry this minimum. The monthly minimum in excess of rate customer charge shall purchase KWH at the published rate.
3. The electric energy becomes the property of the Member after it passes the meter of point of delivery, and the Cooperative shall not be liable for damages resulting therefrom thereafter.
4. The acceptance of this application by the Cooperative shall constitute an agreement between the Member and the Cooperative and this contract for electric service shall continue in force for N/A from the date of service is made available by the Cooperative to the Member and thereafter until canceled by a least 30 days written notice given by either party to the other.
5. It is understood between both the Member and the Cooperative that this contract cannot be transferred or assigned without the consent of the Cooperative.

**Cooperative Use**

DATE: \_\_\_\_\_

WITNESS: \_\_\_\_\_

SERVICE ORDER #: \_\_\_\_\_

MEMBERSHIP PAID/AMOUNT: \_\_\_\_\_

METER NUMBER: \_\_\_\_\_

**Member Use**

APPLICANT: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

ACCOUNT # \_\_\_\_\_

RATE: \_\_\_\_\_ DATE: \_\_\_\_\_

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

On the reverse side is an application form for your signature be signed and returned to this office with your check in the amount listed below within a ten (10) day period from the date of this letter or this account will be disconnected.

Membership Fee \$ 20

\*Deposit Fee \$ \_\_\_\_\_ see below\*  
(Cooperative Use)

(The minimum deposit for residential service is \$250, but is subject to change depending on credit history and location)

\*\*Connect Fee \$ 15 see below\*\*  
(Application processing fee)

Total Amount \$ \_\_\_\_\_ If credit is satisfactory then only \$35 in fees needed to connect service.  
(Cooperative Use)

BY Initials \_\_\_\_\_ I understand that I must prove satisfactory credit through the following method:  
A satisfactory credit rating obtained through a consumer reporting agency, as defined by the Federal Trade Commission.  
By initialing above statement, you give Jackson Electric Cooperative, Inc. the authority to check your credit.

\*\* Non-refundable

WORK PHONE: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_ (Return photocopy please)

EMAIL ADDRESS: \_\_\_\_\_

Please sign and fill in any extras such as cell phone and email addresses you would like us to have and return with required photocopies and fees. Please return within ten working days.

## 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 by the Cooperative's Board of Directors, 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 E 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 and 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.**

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. Transfer of assignment of membership shall be by written request and approved by the Board of Directors of the Cooperative.

**F.**

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 the Cooperative affairs.

It is the policy of this Cooperative that each Member connected to its system has a paid membership fee, connect fee and deposit, and established credit with an executed Membership Application and Agreement and executed Service Agreement for Residential/General Service. The membership fee and deposit are refundable upon discontinuing service and the payment of Member's 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 ID #: \_\_\_\_\_

#### **Second Applicant (if needed for a joint account)**

Date of Request: \_\_\_\_\_

First Applicant Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Social Security #: \_\_\_\_\_

TX D/L or Employee ID #: \_\_\_\_\_

## ELECTRIC BILLING

PO Box 1189, Edna, TX 77957-1189

Edna Office – Phone: (361)771-4400 Fax: (361)771-4406

Bay City Office – Phone (979)245-3029 Fax: (979)245-3562

This is to certify that I, \_\_\_\_\_, hereby grant Jackson Electric Cooperative, Inc. of Edna, Texas, the authority to draft my Credit/Debit Card each month for the amount of the monthly billing, on the 10<sup>th</sup> of each month or the next business day should the 10<sup>th</sup> fall on a Saturday or Sunday.

Date: \_\_\_\_\_

\_\_\_\_\_  
(Cardholder's Signature)

Card Information:  Visa  Mastercard  Discover  American Express  
(Select One. Card must have this logo on the front.)

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Security Code: \_\_\_\_\_ Credit Card Billing Address Zip Code: \_\_\_\_\_  
(3- or 4-digit code on back of card) (5- or 9-digit zip code)

Name on Credit/Debit Card: \_\_\_\_\_  
(Print exactly as it appears on card)

Jackson Electric Cooperative Billing Account Number(s): \_\_\_\_\_  
(Found on your electric bill. If new member, Cooperative will fill this out)

Mailing Address: \_\_\_\_\_  
(Street, Box, etc.) (City, State, Zip)

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**This Credit/Debit card account will be drafted on the 10<sup>th</sup> of each month.**

\*\*\* Please note the transaction will appear as SEDC payment on your Bank/Credit Card statement\*\*\*

Return this completed form to Kim Ellen at the Edna Office