

## Applying for Residential Service

Kauai Island Utility Cooperative (KIUC) will try to establish service to customers within two business days of receipt of the completed application at the Company's business office when all wiring is already in place at a location which has been served by KIUC within the past twelve months.

If you currently have or had service with KIUC in the past, you may call our office at (808) 246-4300 to request service over the phone.

If you are applying for service to an existing home and you haven't had an account with KIUC in the past, please complete the included forms. In addition to completing these forms, KIUC also requires proof of identification, credit deposit, service processing and a membership fee. In order to expedite the application process, you may contact KIUC at (808) 246-4300 to inquire how much the calculated credit deposit will be for the location you are applying for. Once you have completed all of the forms, you may email, fax or mail them to KIUC. A representative will call you to confirm receipt, provide you with a credit deposit quote and account number to enable you to make payment. Once payment has been confirmed, we will be able to schedule your service request. If you have any questions, please contact our Member Services Department at (808) 246-4300.

Email [info@kiuc.coop](mailto:info@kiuc.coop)  
Fax (808) 246-4315  
Mailing Address: Kauai Island Utility Cooperative  
Member Services  
4463 Pahee St, Ste 1  
Lihue, HI 96766-2000

### Required Documents, Forms & Applicable Fees:

- ❖ **Application for Residential Service**
- ❖ **Membership Application**
- ❖ **Photocopy of Picture ID** (acceptable forms of identification are United States issued driver's license, military ID, or government issued passport)
- ❖ **Credit Deposit:** Credit deposits shall not be less than \$10.00 nor more in amount than the maximum estimated charge for service for two consecutive months. KIUC requires a credit deposit for all accounts except when members have established a prompt payment history for service for 12 consecutive months. Credit deposit quotes are honored for 30 days and must be paid BEFORE the service connection is scheduled.
- ❖ **Service Processing Fee: \$20.00** (Billable)
- ❖ **KIUC Membership Fee: \$0.01** (Billable)

**Payment Options: Your account number will be required in order for you to pay any deposits or fees.** It will be provided to you after your application for residential service, membership application and photocopy of your picture ID has been received and processed by a KIUC employee. **After your deposit has been paid, you will need to contact KIUC at (808)246-4300 to schedule your service connect date. Failure to call KIUC will delay your service connect.**

### Online Payments -

**Debit Savings or Checking Account for Free** – Simply create an account at [www.kiuc.coop](http://www.kiuc.coop) by clicking on the dark blue SmartHub is the New E-biz button, or download the SmartHub App on your mobile phone or device. Once logged in, you will be able to make a one-time payment for free!

To get started:

1. Sign into SmartHub. You may need to create an account if this is your first time using SmartHub.
2. Navigate to the Billing & Payment option on the tool bar.
3. Click on the Pay Now button.
4. Click on the Make Payment button.
5. Enter the Routing Number, Account Number and Account Type.

6. If you would like to use this bank account information for future payments, check the 'Save this account for future payments' box.
7. Click 'Submit'.

**Debit or Credit Card** - You may make a payment using your debit or credit card without signing up for SmartHub by visiting our website at [www.kiuc.coop](http://www.kiuc.coop) and clicking on the light blue Pay Now button. There is a convenience fee of \$3.95 per \$500.00 transaction to cover processing costs associated with handling debit and credit card payments.

**Pay-By-Phone -**

**Debit or Credit Card-** To make a payment by phone using your debit or credit card, you may call (844) 846-2692 or (808) 246-4300 and follow the prompts. There is a convenience fee of \$3.95 per \$500.00 transaction to cover processing costs associated with handling credit card and debit payments.

**Mail-in Payments -**

You can mail in your application packet along with your check, money order or cashier's check to the address below.

Kauai Island Utility Cooperative  
Member Services  
4463 Pahee St, Ste 1  
Lihue, HI 96766-2000

**Apply in Person -**

You may complete an application at our Lihue office. KIUC only accepts cash, checks, money orders or cashier's checks in the office.

Account Number											
										-	



Application No.

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**APPLICATION FOR EXISTING  
 RESIDENTIAL SERVICE**

Area or Town \_\_\_\_\_ Service Connection Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

(Monday-Friday, excluding Holidays)

I understand that my service may be discontinued if I am in violation of the terms of the service order agreement, the Company's Tariff, and any laws, rules or regulations by any public authority.

AUTHORIZED SIGNATURE: \_\_\_\_\_ PRINT NAME: \_\_\_\_\_

Customer Name \_\_\_\_\_ Social Security # (last four digits only) \_\_\_\_\_

Spouse Name \_\_\_\_\_ Social Security # (last four digits only) \_\_\_\_\_

Primary Phone (\_\_\_\_) \_\_\_\_\_ Secondary Phone (\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

Have you ever had service with KIUC before? Yes  No  Prior Account Number \_\_\_\_\_

Check One Box House  Condo/Apt  Is there more than one dwelling on this lot? Yes  No

Former Tenant Name at this Address \_\_\_\_\_

Landlord or Owner \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

APPLIANCE INFORMATION					
LIST QUANTITY FOR THE EACH OF THE FOLLOWING APPLIANCES:					
Refrigerator/Freezer _____	Washer _____	Dishwasher _____			
Air Conditioner _____	Pool/Jacuzzi _____				
CHECK ONE BOX FOR EACH OF THE FOLLOWING APPLIANCES:					
Clothes Dryer	Electric <input type="checkbox"/>	Gas <input type="checkbox"/>	Solar <input type="checkbox"/>	Other <input type="checkbox"/>	None <input type="checkbox"/>
Stove/Range	Electric <input type="checkbox"/>	Gas <input type="checkbox"/>	Solar <input type="checkbox"/>	Other <input type="checkbox"/>	None <input type="checkbox"/>
Hot Water Heater	Electric <input type="checkbox"/>	Gas <input type="checkbox"/>	Solar <input type="checkbox"/>	Other <input type="checkbox"/>	None <input type="checkbox"/>

IF YOU ARE AGE 62 OR OLDER, OR YOU ARE A PERSON WHO HAS A QUALIFYING DISABILITY OR SOMEONE IN YOUR HOUSE REQUIRES USE OF QUALIFIED MEDICAL EQUIPMENT THAT REQUIRES ELECTRIC POWER, PLEASE CALL KAUAI ISLAND UTILITY COOPERATIVE AT (808) 246-4300 FOR ADDITIONAL INFORMATION.

NAME (LAST NAME FIRST)											

SERVICE LOCATION (STREET # AND NAME, CONDO NAME AND APT. #)											

MAILING ADDRESS											

MAILING ADDRESS (ADDITIONAL SPACE IF NEEDED)											

MAILING CITY							

STATE

ZIP CODE

ZIP+4

RATE SCHED.

DO NOT WRITE BELOW THIS LINE

DIST.	MULTIPLIER	LOCATION NUMBER

APPLICATION TAKEN BY: \_\_\_\_\_

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

METER NUMBER	READING	DATE ENERGIZED

WORK COMPLETED BY: \_\_\_\_\_

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

Phase: \_\_\_\_ Volts: \_\_\_\_ / \_\_\_\_ Wires: \_\_\_\_ Connected Load: \_\_\_\_ Estimated Demand: \_\_\_\_

ENGINEER: \_\_\_\_\_ DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_

SERVICEMAN COMMENTS:

Eng Comments \_\_\_\_\_

County Inspector: \_\_\_\_\_ County Approval Comments: \_\_\_\_\_

Remarks: \_\_\_\_\_

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# SERVICE ORDER AGREEMENT

## **NOTE: REGARDING SERVICE INSTALLATION**

**KIUC CURRENTLY HAS TWO TYPES OF METER CONNECTIONS. IF A NON-SMART METER IS INSTALLED AT YOUR LOCATION, THE SERVICE REPRESENTATIVE WILL LEAVE THE MAIN BREAKER IN THE OFF POSITION FOR SAFETY REASONS. THE MAIN BREAKER IS USUALLY LOCATED AT THE METER SOCKET. A BLACK, TAG ON THE METER SEAL INDICATES THAT ELECTRIC SERVICE IS AVAILABLE. YOU WILL NEED TO TURN ON YOUR MAIN BREAKER TO ALLOW POWER TO FLOW.**

**IF A SMART METER IS INSTALLED AT YOUR LOCATION, THE MAIN BREAKER SHOULD ALREADY BE IN THE "ON" POSITION. FOR SAFETY REASONS, THE METER WILL DISPLAY "ARM" TO INDICATE POWER IS READY TO BE RECEIVED. TO ALLOW POWER TO FLOW, PRESS THE BLACK BUTTON ON THE FACE OF THE METER. THE DISPLAY WILL CHANGE FROM "ARM" TO "CLS". IF POWER IS NOT AVAILABLE, THE METER WILL DISPLAY "OPN".**

BY SIGNING THIS APPLICATION, THE APPLICANT AGREES:

1. TO ABIDE BY THE COMPANY'S TARIFF (RULES) ON FILE WITH THE PUBLIC UTILITIES COMMISSION, STATE OF HAWAII.
2. THAT POWER SERVICE WILL BE TERMINATED ON FAILURE TO PAY BILLS AS RENDERED WITHIN THE TIME PERIODS PRESCRIBED IN THE AFOREMENTIONED RULES.
3. THAT ANY CREDIT DEPOSIT WITH THE COMPANY WILL BE APPLIED WHEN THE ACCOUNT HOLDER ESTABLISHES CREDIT FOR THIS ACCOUNT OR WHEN THIS ACCOUNT IS CLOSED TO OFFSET THE CLOSING BILL.
4. THAT CREDIT DEPOSITS ARE NOT TRANSFERRABLE.
5. TO HOLD THE COMPANY HARMLESS FOR ANY INTERRUPTION OF SERVICE THAT MAY BE CAUSED FROM TIME TO TIME THROUGH SYSTEM OR POWER PLANT FAILURES OR BY ACCIDENT, ACT OF GOD, FIRES, STRIKES, RIOTS OR WAR: OR WHENEVER NECESSARY TO MAKE REPAIRS OR IMPROVEMENTS TO THE SYSTEM.
6. IF CUSTOMER'S PORTION OF APPLICATION IS NOT FULLY COMPLETED, SERVICE WILL BE DELAYED.
7. TO PROVIDE CLEAR ACCESS TO ELECTRIC METER(S).
8. TO PURCHASE KAUA'I ISLAND UTILITY COOPERATIVE LOCKS OR LOCK BOXES, IF METER(S) IS BEHIND LOCKED GATES OR DOORS.

Kaua'i Island Utility Cooperative's Bylaws and Tariff are available for review at [www.kiuc.coop](http://www.kiuc.coop) or at our Lihue Office at 4463 Pahe'e Street, Lihue, HI 96766.

## STATEMENT OF NON-DISCRIMINATION

Kaua'i Island Utility Cooperative is the recipient of Federal financial assistance from the U.S. Department of Agriculture (USDA). The USDA prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202)720-2600 (voice and TDD).

To file a complaint of discrimination, write to USDA, Director Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800)795-3272 (voice) or (202)720-6382 (TDD). USDA is an equal opportunity provider and employer.



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## Membership Application

As a Kaua'i Island Utility Cooperative member, I agree to the following terms and conditions:

1. I will receive my electric service from KIUC and pay for it according to the rates and rules approved by the Hawai'i Public Utilities Commission.
2. I will purchase my electricity on Kaua`i only from KIUC, provided, however, I can generate my own electricity using my own equipment, or purchase photovoltaic energy generated by a third party's equipment provided solely to me. If that equipment is connected to KIUC's system, it will strictly conform with all local and State safety codes and other regulations that may apply.
3. I will abide by the rules of KIUC put in place to protect each member through the Articles of Incorporation, By-laws, and policies adopted by KIUC's Board of Directors.
4. I understand this agreement applies whether I own or lease my property, and whether that property is a home or business.

I understand this agreement becomes effective as soon as I receive my first electricity service from KIUC.

Must be signed by the person whose name this account has been established.

NAME (print) \_\_\_\_\_ DATE \_\_\_\_\_

NAME (signature) \_\_\_\_\_

CURRENT KIUC ACCOUNT No. \_\_\_\_\_

ACCEPTED BY: \_\_\_\_\_

(KIUC Representative Initials)