

## Customer Information

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Service Address \_\_\_\_\_ Account # \_\_\_\_\_

Email \_\_\_\_\_ Customer Status  Owner  Tenant  Landlord

If Customer is not the owner, give the following information for the:  Owner  Owner's Agent

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

## Home Inventory

If you have more than one appliance, please separate information with a comma (,).

### Appliance Types

# \_\_\_\_\_ Stove:

gas  electric  none

# \_\_\_\_\_ Washer: (\_\_\_\_\_ yrs)

gas  electric  none

# \_\_\_\_\_ Dryer:

gas  electric  clothes line  none

# \_\_\_\_\_ Water Heater:

gas  electric  heat pump  none

Solar

#: \_\_\_\_\_ Refrigerator \_\_\_\_\_ yrs

# \_\_\_\_\_ Freezer \_\_\_\_\_ yrs

# \_\_\_\_\_ Dishwasher

# \_\_\_\_\_ Water Cooler

# \_\_\_\_\_ Coffee Maker's

# \_\_\_\_\_ Rice Cooker

# \_\_\_\_\_ Microwave

# \_\_\_\_\_ Fan(s) (portable)

# \_\_\_\_\_ TV(s)

# \_\_\_\_\_ Game Console

# \_\_\_\_\_ Cable Box(s)

# \_\_\_\_\_ Window AC(s) \_\_\_\_\_ yrs

# \_\_\_\_\_ Split / Central A/C

# \_\_\_\_\_ Ceiling Fan(s)

# \_\_\_\_\_ Pool/Jacuzzi

# \_\_\_\_\_ Lights (incandescent)

# \_\_\_\_\_ Lights (CFL)

# \_\_\_\_\_ Lights (LED)

## Survey

Are you signed up for KIUC's online account management tool, SmartHub?  Yes  No

Why are you interested in this program? (select all that apply)

- to lower bill
- to be more energy efficient
- to learn what KIUC has to offer
- to have one-on-one customized attention
- other - please explain:

What is the best way to contact you?  email  phone

What are the best times to contact you? \_\_\_\_\_