



## **BUSINESS LIGHTING APPLICATION**

MEMBER INFORMATION (PLEASE PRINT)

Member Name:		Date:	
Address:		BEC Acct #:	
City, State, Zip:		Phone:	
Business Tax Status:	Corporation Partnership _ Exempt (tax-exempt, non-profit)	_	D:
Tax ID#: (EIN F	ederal Tax ID SSN): #		-
on IRS Form 1099 unless	ebates may be taxable and if greater than \$60 you have identified yourself as a corporation you as a result of the incentive/rebate. Associmember cooperatives.	or as tax exempt. Cooperative is no	t responsible for any taxes
Type of business:	Church Government Industrial Restaurant Agricultural (please specify ) Other (please specify )	Retail School	
Contact Name:		Phone #:	
member per year of \$	f Boone Electric Cooperative; must ha 630,000; receipts must accompany app st of the new lighting (labor not inclu	plication; rebate is 6¢ per kilow	vatt hour savings or 40%
Signature:			