

Whitney Office

4581 FM 933- PO Box 2480

Whitney TX 76692-5480

Tel: 254-694-5237 Fax: 254-694-4062

Toll Free: 888-850-6551



Midlothian Office

300 Silken Crossing

Midlothian, TX 76065

Tel: 972-723-2900 Fax: 972-723-2911

Serving our Members with Pride since 1937

Itasca Main Office

115 East Main St- PO Box 127

Itasca, TX 76055

Tel: 254-687-2331 Fax: 254-687-2428

Toll Free: 800-338-6425

LIFE SUPPORT REGISTRATION

Account Name _____

HILCO Account #: _____

911 Address _____

Home Phone#: _____

Cell Phone# _____

Alternate Phone#: _____

A TELEPHONE NUMBER IS VERY IMPORTANT ON YOUR ACCOUNT BECAUSE OF YOUR EMERGENCY STATUS. PLEASE KEEP YOUR PHONE NUMBERS UPDATED AT ALL TIMES.

Name of person on Support _____

Equipment in Use _____

Do you have an emergency back-up in case of an outage? yes no

If yes, what type do you have? _____

How many hours will it last? _____

CONSUMER STATEMENT

By signing this statement, I understand that I will be notified by HILCO Electric Cooperative, Inc. (HILCO) of any scheduled outages and that it is my responsibility to provide current and accurate information to HILCO on the status of an unplanned, unscheduled, or emergency outage. HILCO will attempt to contact the residence to check on the situation and affirm that power has been restored. I further understand that status of Life-Support list will not prevent the termination of my utility service, in the event that I fail to meet the payment requirements/obligations on my account. I will make prior arrangements with the HILCO business office and they will be reasonable with me in trying to work with me to prevent the possibility of termination of service for non-payment. I attest that the information that I have provided is true and accurate.

Member Signature _____

Date _____

FOR OFFICE USE ONLY

Received by _____

Date _____