



APPLICATION & CONTRACT

CY.	DIST.	RT.	FOLIO	S.

☐ RATE CODE
ELECTRIC

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APPLICANT'S FULL NAME		LAST	BOKKA		FIRST	SUNIL REDDY		MIDDLE
SERVICE ADDRESS	NUMBER STREET		APT. NO.		VILLAGE		ZIP	
	45 ADAMS ROAD		2H		CENTRAL ISLIP		NY 11722	
NEAREST CROSS STREET	PREMISES OCCUPIED AS		STARTING ON DATE		TELEPHONE <input checked="" type="checkbox"/> HOME <input type="checkbox"/> OTHER		<input checked="" type="checkbox"/> OWN <input type="checkbox"/> RENT	
		10/24/2020		10/23/2020		248-403-3047		
MAILING ADDRESS (IF OTHER THAN ABOVE)						EMAIL		
						BSUNILREDDY00@GMAIL.COM		
FORMER ADDRESS			NUMBER OF YEARS HERE		FORMER ACCOUNT #			
EMPLOYED BY	ADDRESS		OCCUPATION		TELEPHONE		NUMBER OF YEARS HERE	

THE APPLICANT AGREES THAT HE OR SHE WILL PAY THE APPLICABLE RATES AND CHARGES FOR THE ELECTRIC SERVICE HEREIN REQUESTED AND TO BE BOUND BY AND COMPLY WITH THE RULES AND REGULATIONS OF THE COMPANY APPLICABLE THERETO. PSEG Long Island LLC and its operating subsidiary have been appointed as agent by the Long Island Power Authority to provide the day-to-day management and operations services of its electric utility system.

SIGNATURE OF APPLICANT/AGENT

DATE

AGENT - ALSO **PRINT** YOUR NAME ON LINE

DATE

☐ CUT ON ☐ CHANGE RATE ☐ NEW JOB NO. _____

DEPOSIT AMOUNT

DEPOSIT RECEIPT NO.

DATE PAID

COMPANY ACCEPT.

DATE