



Credit Inquiry Reply

This Form Needs to be Filled In by Your Present Utility Company

Customer Name: _____

Account Number: _____

Length of Service: (12 months or more of continuous service?) _____

Connect Date: _____

Disconnect Date: _____

Final Bill Paid / All Bills Paid? _____

Number of Late Payments in Last 12 Months of Service: _____

Number of Disconnects for Non-Payment in the Last 12 Months of Service: _____

Electric Utility: _____

Form Completed by: _____

Position: _____

Date: _____

Telephone Number: _____

Send or Fax Completed Form to the Following Location:

Fayette Electric Cooperative, Inc.

P.O. Box 490 • 357 N. Washington Street

La Grange, TX 78945

Phone: 979-968-3181 • 800-874-8290 • Fax: 979-968-6752

e-mail: electric@fayette.coop