

Insuragy Residential Customer Enrollment

Today's Date: _____

Customer ID Number Assigned: _____

Name _____

Date of Birth ____/____/____ Social Security Number _____

Phone (Mobile / Landline) (____) _____ - _____

Email _____

AUTHORIZED REPRESENTATIVE _____

Electric Service will be for a: ___ House ___ Apartment/Condo ___ Mobile Home

I am: ___ Switching Providers ___ Setting up new service

New service start date: ____/____/____ or ASAP

Ins Quote: Yes No

Company: _____ Plan: _____ Rate: _____

* Some customers may require a refundable deposit

Service Address

Texas: ESI-ID# (if known, found on your electric bill) _____

Address _____ Apt/Unit # _____

City _____ State _____ Zip _____

Is billing address the same as service address? ___ Yes ___ No

If different, please provide billing address below:

Address _____ Apt/Unit # _____

City _____ State _____ Zip _____

Contract Length (circle one)

3 Month 4 Month 6 Month 9 Month 10 Month 12 Month
18 Month 24 Month 36 Month Other _____ Month-to-Month

Deposit Required? ___ Yes ___ No

If deposit required, supply the following:

Routing # _____ Checking Account # _____

OR

Card #: _____ Exp (mm/yyyy): _____ CVV: _____

Name on Card: _____

Autopay? ___ Yes ___ No

I hereby authorize _____ to act on my behalf to enroll the service
(broker name)
address listed, in the electricity plan shown.

Signature _____ Date _____

Customer Account Setup

User Name: _____

Suggestion: lastname, firstname (no capital letters, no spaces) Ex: smithjohn

Password: _____

Suggestion: Lastname, birthyear (first letter of last name capitalized)

Ex: Smith1948 (use Lastname plus full birth date if password above is too short)

Secret Question (If required): _____

Answer: _____