

**Fort Cobb Fuel Authority, LLC**  
**Navitas Utility Corporation, LLC**  
**Navitas TN NG, LLC      Navitas KY NG, LLC**

P.O. Box 183  
Eakly, Oklahoma 73033-0183  
Ph. #405-797-3303    Fax # 405-494-4228

**Service Agreement**

Account # \_\_\_\_\_ Deposit # \_\_\_\_\_ Deposit \$ \_\_\_\_\_ Date \_\_\_\_\_

Name of Responsible Party \_\_\_\_\_ SSN or FED ID# \_\_\_\_\_

DL# \_\_\_\_\_ DOB \_\_\_\_\_

(Please provide a copy of your Driver's License)

Spouse/co-occupants Name \_\_\_\_\_ SSN \_\_\_\_\_

DL# \_\_\_\_\_ DOB \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip Code \_\_\_\_\_

Physical/911 Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

Home Ph. # \_\_\_\_\_ Cell # \_\_\_\_\_ Cell # \_\_\_\_\_

Employer \_\_\_\_\_ Co-occupant Employer \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Work # \_\_\_\_\_ Work # \_\_\_\_\_

Previous Address \_\_\_\_\_

Are you over age 65? Yes \_\_\_\_\_ No \_\_\_\_\_      Disabled? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever had service with Fort Cobb Fuel Authority, LLC before? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, at what address \_\_\_\_\_

Initial here that you received "The Line Responsibility" and "Consumer Information" sheet. \_\_\_\_\_

The undersigned agrees to pay the established utility rates as set forth and agrees to abide by the regulations and policies governing said service. This agreement becomes effective upon the establishment of service.

Responsible Party Signature \_\_\_\_\_

Printed Signature \_\_\_\_\_

Name of Property Owner \_\_\_\_\_