People's Energy Cooperative
Your Touchstone Energy® Cooperative

Address: 1775 Lake Shady Avenue South
Oronoco, MN 55960
Phone: (800) 214 – 2694
Email: memberservices@peoplesenergy.coop

Name Maintenance for Electric Membership and Capital Credits

People's Energy Cooperative may only discuss account information and accept account-related requests from authorized account owners. Changes to membership ownership may affect account authority, responsibility for the account, and rights to capital credits. When membership is changed from either single or joint, capital credits previously earned shall remain under the current member number. Upon the death of one individual in a joint membership, capital credits associated with that membership shall belong solely to the surviving member listed on the account, subject to applicable Cooperative bylaws, policies, and applicable law.

Privacy Notice
People's Energy Cooperative respects the privacy of its members. Information obtained from members is used solely for purposes related to providing electric service and conducting Cooperative business. Account information is shared only with authorized account holders, as authorized by the member, as necessary to complete member-initiated transactions, or as required by law.

By signing this form, I certify that I am authorized to request the changes described herein and authorize People's Energy Cooperative to make the requested changes and update its records accordingly. I further acknowledge and understand the privacy, account ownership, and capital credit provisions described in this form.

People's Energy Cooperative reserves the right to deny or condition any request that does not comply with Cooperative bylaws, policies, or applicable legal requirements.

Membership Change (single or joint) Member Number:

From: _____

To: _____

If going from single to joint membership, we need the following information for the additional name:

Date of Birth: _____ Social Security Number: _____

Phone Number: _____ Email Address: _____

Membership Name Change or Correction Member Number:

From: _____

To: _____

Signature of Member: _____ Date: _____

Signature of Member: _____ Date: _____

Office Use

Approved by PEC: _____ Job Title: _____ Date:_____