

SEND APPLICATION TO:

*Sioux Valley Energy
P.O. Box 216
Colman, SD 57017*

OR CONTACT A CUSTOMER SERVICE REPRESENTATIVE AT:

1-800-234-1960

WHO CAN I CONTACT FOR MONETARY HELP IN PAYING MY ELECTRIC BILL DURING THE WINTER?

You may qualify for state or federal assistance. For complete qualifications and application information, please contact one of the following organizations:

*Southwestern MN Opportunity Council
P.O. Box 787
Worthington, MN 56187
1-800-658-2444*

*Rock County Family Services
P.O. Box 715
Luverne, MN 56156
507-283-5070*

*Pipestone County Family Services
P.O. Box 157
Pipestone, MN 56164
507-825-6720*

WHO CAN I CONTACT FOR INFORMATION ON HOW TO REDUCE MY ELECTRIC BILL?

*Energy Information Center
1-800-657-3710*



**P.O. Box 216
Colman, SD 57017
1-800-234-1960**

MINNESOTA COLD WEATHER LAW

What you need to know.



WHAT IS THE MINNESOTA COLD WEATHER LAW?

Under Minnesota law, electricity cannot be disconnected for non-payment during the winter months if you meet the following criteria:

- You declare an inability to pay (by filling out this form).
- Your total household income is less than 50% of the state median income.
- Your account is current or you have entered into a payment schedule that is acceptable to both you and your electrical provider. You must keep the payment arrangement that you agreed to.

WHAT IS THE INTENT OF THE LAW?

Section 216B.097 of the Public Utilities Act was created to keep Minnesota residents safe and warm during the winter months.

WHAT MONTHS DURING THE WINTER IS THE LAW IN EFFECT?

From October 15 through April 15.

DO I HAVE TO LIVE IN THE RESIDENCE TO BE COVERED UNDER THE MN COLD WEATHER LAW?

The rule applies to your primary residence only.

WHAT IF I HAVE ALREADY RECEIVED A SHUT-OFF NOTICE?

You can be protected from **October 15 to April 15**. If the disconnect date on your notice falls between these dates, the appropriate paperwork must be returned to Sioux Valley Energy prior to the date of disconnection on the notice.

WHAT DO I HAVE TO DO TO BE PROTECTED BY THIS LAW?

- Complete the form on this brochure and return it to Sioux Valley Energy by October 15.
- Provide documentation to Sioux Valley Energy that your total household income is less than 50% of the state median income. This information is included in your Income Tax Return. If you qualify for energy assistance through the Southwest MN Opportunity Council, this requirement has been satisfied.
- Be current on your electric bill or make a mutually acceptable payment arrangement with Sioux Valley Energy prior to October 15. The payment arrangement made must be accepted by Sioux Valley Energy in order for it to qualify for protection against disconnection.

WHAT IF MY ELECTRIC SERVICE IS ALREADY DISCONNECTED BEFORE OCTOBER 15?

If you are disconnected before October 15, you may qualify for the Reconnection Plan. To qualify, you must be a residential customer who:

- 1) Has had their electricity disconnected for non-payment.
- 2) Has a household income of less than 50% of the state median income.
- 3) Agrees to a payment arrangement that is acceptable to both you and Sioux Valley Energy.

WHAT IF I AM UNABLE TO UNDERSTAND THAT MY SERVICE IS GOING TO BE DISCONNECTED BECAUSE I HAVE A DISABILITY OR DO NOT UNDERSTAND ENGLISH?

You may want to have a 'Third Party Notice' sent to a friend or relative. This person is notified to make sure you are aware of the impending disconnect. Please contact Sioux Valley Energy if you wish to have a disconnect notice sent to a 'Third Party'.

MN COLD WEATHER LAW APPLICATION

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____

Work Phone _____

Cell Phone _____

Account Number
(From your electric bill) _____

Total Amount Owed _____

Total Annual Household Income _____

Number of persons living full time in the household
(including yourself) _____

Please check if the following options apply to your home:

_____ a household member requires medically necessary equipment

_____ there is a disabled person in the residence

By signing this form, I hereby authorize any gas or electric utility that provides me service to exchange billing information. I acknowledge that I have read and understand the enclosed Notice of Residential Customer Rights and Possible Assistance. I attest that the above information is true and correct.

Customer Signature

Date _____

Complete form and return to Sioux Valley Energy (please print).