

RESIDENTIAL GUARANTEE OF APPLICANT'S ELECTRIC BILL

Eligibility: Guarantor must have an active electric account with Duke Energy and must have been a customer of Duke Energy for a minimum of 2 consecutive years with no more than 2 late payments in the last 12 months. The individual signing this form must be listed as the primary account holder or spouse on the Duke Energy account.

INSTRUCTIONS: (1) Complete the form. (2) Guarantor should keep a copy for his/her records. (3) Mail the original form to Duke Energy, Attn: DT01X – Guarantor Desk, 9700 David Taylor Dr, Charlotte, N.C. 28262-2363 or FAX to 1-800-943-6909 (Return form at least two business days prior to service start date.)

APPLICANT: Last Name: _____ First Name: _____ Middle Initial: ____ Suffix: _____

Account Number (Required) _____ E-mail address _____

Service Address _____

City _____ State _____ ZIP _____ Home Phone () _____ - _____

Mailing Address _____

City _____ State _____ ZIP _____ Work Phone () _____ - _____

So that Applicant will not have to make a deposit, I guarantee payment to Duke Energy for electric service bills rendered to Applicant, at this or a future service address, not to exceed \$ _____ (Required). Residential guarantors are limited to a maximum of \$600 in liability while serving as guarantor for one or more customers.

This Agreement will remain in effect for three (3) years from the date of the agreement unless the Applicant establishes a satisfactory payment record. If, during these three years, the Applicant establishes a satisfactory payment record, this agreement will no longer be valid. The Applicant's payment record will be considered "established" when ALL three of the following conditions are met.

1. Applicant's payment has not been delinquent more than two times during the last twelve (12) consecutive monthly billings.
2. Applicant's electric service has not been disconnected for non-payment during the last twelve (12) consecutive monthly billings.
3. Applicant's electric service account is not currently delinquent.

I understand that

- a MINIMUM period of twelve (12) months is required for the Applicant to establish a satisfactory payment record with Duke Energy.
- I have the right to cancel this Agreement by giving Duke Energy a 30-day written notification; I am still obligated for all services rendered to Applicant through the 30-day notice period.
- the Applicant's unpaid bills (not to exceed the amount specified) may be transferred to my electric service account, and my service may be discontinued if I do not pay in accordance with the Service Regulations of Duke Energy.

GUARANTOR: Last Name _____ First Name _____ Middle Initial ____ Suffix _____

Account Number _____ Service Address _____

City _____ State _____ ZIP _____ Home Phone () _____ - _____

Mailing Address _____

City _____ State _____ ZIP _____ Work Phone () _____ - _____

Relationship: _____ (Parent, Brother, Sister, etc.)

Signature of Guarantor _____ Date _____

Guarantor Identification:

Birth Date _____ Social Security # (Last 4 digits) _____

DUKE ENERGY MAY REVEAL APPLICANT'S PAYMENT RECORD TO THE GUARANTOR.

RETURN FORM AT LEAST TWO (2) BUSINESS DAYS PRIOR TO SERVICE START DATE.



Date: _____
 Suffix: _____
 Middle Initial: _____
 First Name: _____
 Accepted for Duke Energy by: _____
 Applicant's Last Name: _____