



CIAC Refund Request

Member (Claimant) Name: _____

Mailing Address: _____

Business Partner Number: _____

Work Order Number (if available): _____

Service Address of Extension (if available): _____

Phone - Day: _____ Evening: _____

E-mail Address: _____

In order to be eligible for a CIAC refund, all the following requirements must be met:

- *I have constructed an overhead residential service in which the CIAC amount was \$7,000 or greater. Important Note:(this amount does not include the purchase of a meter loop, deposits, permits, Houston Toad fee or the activation fee).*
- *The construction of the overhead line above was completed within the last three (3) years and the line is now also being utilized to serve another member.*
- *This refund request is being completed within ninety (90) days of construction of the line for the other member.*
- *I still own the property on which the extension I am requesting refund is located.*

I have read and verified the eligibility requirements for a Bluebonnet Electric Cooperative 30% CIAC Refund.

Signature: _____

Date: _____

Return completed and signed CIAC Refund Request form to:

Bluebonnet Electric Cooperative
Attention: New Service Coordinator
P.O. Box 729
Bastrop, TX 78602

You will be notified by phone of the results of the review of this CIAC refund request. Please allow 3 - 4 weeks processing time.

For Bluebonnet use only:

Notes:

Received By: _____

Date Received: _____

Amount Refunded: _____

GL Account Number: _____

Approved By: _____

Approval Date: _____