



## 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: \_\_\_\_\_

### *CIAC Refund Requirements:*

- 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: \_\_\_\_\_