

Barron Area Phone: (715) 537-3171
Toll Free: 800-322-1008
Fax: (715) 637-1906



Dallas Sloan
General Manager
www.barronelectric.com

DISCONNECT SERVICE REQUEST FORM

**Please contact us a week prior to disconnect date to enable us to
discontinue service.**

Barron Electric Cooperative does not charge to disconnect a service. If service is reconnected within 12 months under the same member's name, there is a charge of \$100 plus a minimum charge for each month during which service was disconnected.

Requested Date of Disconnect: _____

Electric Account Number: _____

Name: _____ (as shown on electric bill)

Service Address: _____

City/State/Zip Code: _____

Contact Telephone Number for Questions: _____

New Street Address or PO Box: _____

Name of Person Filling Out Form: _____

Comments: _____

Signature: _____

We have enjoyed serving you and hope we can help you again in the future.
Thank you for your membership in the cooperative.

Please return form to:

Barron Electric Cooperative
PO Box 40
Barron WI 54812-0040

Fax: 715-637-1906 billing@barronelectric.com