santee cooper®

CHANGE CONTACT INFORMATION
Commercial Property

Name on Account: _____

Account No.: _____

Customer ID: ☐ Federal ID No. ___ - _____
☐ Social Security No. _____ - _____ - _____

I would like to change my:

☐ Mailing Address:

Address: _____ Apt/Unit/Lot #: _____

City: _____

State: _____ Zip: _____

Country: UNITED STATES

☐ Telephone:

Service: _____ - _____ - _____ (Phone number at actual service location.)

Home: _____ - _____ - _____

Work: _____ - _____ - _____ Ext.: _____

How would you like us to contact you if necessary? ☐ Home Phone ☐ Work Phone

☐ E-mail Address:

E-mail Address: _____

Would you like to receive information on programs and services Santee Cooper offers via e-mail? ☐ Yes ☐ No

Requested by
Signature: _____ Date: _____

Home Phone: _____ - _____ - _____

Work Phone: _____ - _____ - _____ Ext.: _____

Select: » » **Horry-Georgetown Retail**

Mailing Address: