

**APPLICATION FOR MEMBERSHIP**  
**CALIFORNIA MUNICIPAL UTILITIES ASSOCIATION**

915 L Street Suite 1460 • Sacramento CA 95814-3705  
(916) 326-5800 • FAX (916) 326-5810  
[www.cmua.org](http://www.cmua.org)

The undersigned organization hereby submits application for membership with the CALIFORNIA MUNICIPAL UTILITIES ASSOCIATION, agrees to abide by the terms and provisions of the Articles of Incorporation and By-Laws of the Association, and, upon acceptance by the Board of Governors, shall be entitled to the services of the Association as therein provided.

Agency Name \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address \_\_\_\_\_ Street Address if Different \_\_\_\_\_

City-State-Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Web Site Address \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Authorizing Name & Title \_\_\_\_\_ Authorizing Signature \_\_\_\_\_

Name & Title of Utility's Manager \_\_\_\_\_

Governing Board \_\_\_\_\_

For the purpose of computing annual dues, please supply the following information, as it applies, for the preceding calendar year:

**Electric Utilities:** Total retail KWH sales \_\_\_\_\_

**Water Utilities:** Total retail domestic water deliveries (including residential, commercial & industrial, but excluding agricultural) in acre feet \_\_\_\_\_

**For a City Currently without utility service: Minimum member dues \$2,350**

REFERRED BY:

Name \_\_\_\_\_

Organization \_\_\_\_\_