



RESIDENTIAL APPLICATION FOR UTILITY SERVICE

PRIMARY ACCOUNT HOLDERS INFORMATION:

First Name: _____ Last Name: _____

New Service Address: _____ Service to begin as of: _____

Mailing address if different from above: _____

Are you buying the property or renting? (circle one) Buying Renting

Last 4 Digits of Social Security No.: _____ or 4-digit PIN No.: _____
(this will be used for identification verification purposes)

Home Phone Number: _____ Cell Phone Number: _____

Social Security Number (optional): _____ Employer: _____

SPOUSE OR ROOMMATE INFORMATION:

First Name: _____ Last Name: _____

Spouse or Roommate? (circle one) Spouse Roommate

Last 4 Digits of Social Security No.: _____ or 4-digit PIN No.: _____
(this will be used for identification verification purposes)

Home Phone Number: _____ Cell Phone Number: _____

Social Security Number (optional): _____ Employer: _____

IF YOU WOULD LIKE TO RECEIVE YOUR BILL VIA EMAIL:

Email address: _____ I would also like to receive a paper bill: Yes No

I understand that I will be receiving my utility billing via email and will not receive a statement in the mail and that failure to receive this statement does not alter my monthly obligation. I also agree to contact the City Utility Office should my email address change.

Initial Here: _____

Others authorized to receive information about your account: _____

By signing below, I hereby agree to take full responsibility for all Utility Billings for the above address until I notify the City Utility Office that I wish to discontinue services and to close my account. I also understand that I shall pay any and all charges related to the reasonable costs of collection of this account/service. The costs of collection include, but are not limited to, court costs, surcharges, attorney fees, and collection agency fee, except that such costs of collection may not include both attorney fees and collection agency fees.

Signature: _____ Date: _____