



Account # _____
Deposit \$ _____ Paid _____

# Application for Utility Service

Please complete application and submit with a government-issued photo ID.

**Primary Customer Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

Driver's License No \_\_\_\_\_ Phone No \_\_\_\_\_

Social Security No \_\_\_\_\_ Employer \_\_\_\_\_

Previous Address \_\_\_\_\_

Email \_\_\_\_\_ Check for emailed bills

**Secondary Customer Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

Driver's License No \_\_\_\_\_ Phone No \_\_\_\_\_

Social Security No \_\_\_\_\_ Employer \_\_\_\_\_

Email \_\_\_\_\_

(Note: Identifying information & phone numbers are for customer security and City use only.)

**In case emergency services are required and we are unable to contact you please list an additional contact.**

Name \_\_\_\_\_ Phone No \_\_\_\_\_

**Address Information**

Service Address \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

If Renting: Property Owner \_\_\_\_\_ Phone No \_\_\_\_\_

Service Start Date \_\_\_\_\_

**Applicant(s) hereby apply for utility services for the premises listed above pursuant to the rules of the utility. Applicant(s) agree to pay all bills rendered by the utility until the utility is given notice to discontinue services. If the account becomes delinquent, the applicant(s) will be responsible for any collection costs with recovery of the debt. A signature by the applicant(s) indicates they are at least 18 years old and the information provided on this form is correct.**

\_\_\_\_\_  
Signature – Primary Applicant                      Date                      Signature – Secondary Applicant                      Date

For information on automatic payment options or billing information visit our website or contact us.