



### Service Request Application

Previous Customer?: Yes ( ) No ( ) If yes, where? \_\_\_\_\_

Name(s) \_\_\_\_\_

Property Location \_\_\_\_\_

(City) (State) (Zip)

Mailing Address \_\_\_\_\_

(City) (State) (Zip)

Primary Phone \_\_\_\_\_ Other Phone \_\_\_\_\_

**How would you like to receive notices and alerts?** Text ( ) Call ( )

Rent ( ) Own ( ) Other ( ) \_\_\_\_\_

If Rent: Property Owners Name: \_\_\_\_\_ Phone \_\_\_\_\_

Last 4 Digits of SSN \_\_\_\_\_

Applicants place of employment \_\_\_\_\_

Name of Spouse \_\_\_\_\_ Phone \_\_\_\_\_

List any authorized users who may inquire/make changes to account.

\_\_\_\_\_

\_\_\_\_\_

Email Address \_\_\_\_\_

Would you like to sign up for e-bills? Yes ( ) No ( )

**I hereby authorize service to be established in my name at the above property location and agree to pay for service until discontinued by my request in writing. I understand that this application is accepted subject to the availability of service at this location.**

Applicants signature(s) \_\_\_\_\_

Date \_\_\_\_\_