



Application for Renter

Renter # _____

Applicant _____ SSN/DL _____

Co-Applicant _____ SSN/DL _____

--or--

Business Name _____ Tax ID _____

Authorized Representative _____

Landlord _____

Physical Address _____ City _____

Billing Address _____ City _____

Phone Number _____ Email Address _____

Phone Number _____ Email Address _____

Please initial acknowledgment of receipt of the following item:

___ South Side Handbook

Is anyone on a life Support System in the Home? Yes No

Paperless Billing? Yes No

Automatic Payments? Yes No

Deposit \$ _____

I certify that I have provided, to the best of my knowledge, correct information, and I agree to comply with the By-Laws and Policies stated in the Handbook of South Side Electric, Inc.

Signature _____ Date _____

OFFICE USE ONLY

Meter Number _____ Start Date _____ Beginning Reading _____
Deposit Charged _____ Paid _____ Billed _____

Update QB Update Spreadsheet Update CIS

ACCOUNT CLOSING PROCEDURES

Forwarding Address _____
Update Beneficiary _____
Final Reading Date _____ Final Reading _____
Membership/Deposit Amount Refunded to Account _____
Amount of Refund Check Issued _____ Date _____

Update CIS Make Customer Inactive in QB