

## **Utility Service Application**

Owner Renter	Purchase or Lease Date	·		
Service Address:				
Mailing Address(if different from ser				
Applicant Information		Co-Applicant Information		
Name:		Nam	ne:	
Social Security Num:		Social Security Nu	m:	
Date of Birth:		Date of Bir	th:	
Cell Phone Number:		Cell Phone Number	er:	
Employer:		Employe	er:	
Work Phone Number:		Work Phone Number	er:	
Email Address:		Email Addres	SS:	
Adult Occupants in Household:		_ Total Occ	cupants in Hous	sehold:
If Renting, Landlord's Name:		_ If Renting, La	andlord's Phone	e Num:
		<del>-</del> ,		
lave you had service with the Town of Lu	umberport before? Yes	No		
If yes, please list address:				
Name, Address, & Phone Number of Clo Address:	ose Friend/Relative Not Living a	t the Service		
Addiess.				
ecurity Deposit Information: his deposit shall constitute a guarantee that all sums ater services, refund any deposit remaining after de ayment any and all services regardless of the sufficie le discretion of the Town.	ducting all amounts due the Town for suc	ch services. Furthermore, the	e deposit shall not p	preclude the Town from discontinuing for non-
the undersigned hereby makes application for water, coordance with the applicable rates and charges as ansfer the account until the Town received a requesight of access to the Town's agents on the customer that the Town is notified of cancellation of service, the ompayment obligations. The customer shall pay all the customer and the Town that this contract shall own in this service agreement is correct and true to	specified in the Town's rate schedule for it to discontinue the service(s) or discontinus is premises at all reasonable times and for at all billings rendered by said company so I collection expenses or attorney fees due apply to the original service address of the interval in the service and service services services services and services and services services services and services services and services services services and services services services services and services ser	the service address and any nues service(s) due to failure or necessary purposes. I/We shall be due and payable upo e to default or failure to perfor	other location that to comply with this assume responsib n receipt. Failure t rm obligations incur	may be incurred as a result of a request to agreement. The customer agrees to allow illity for service beginning from connecting date o receive a bill does not release a customer rred as set forth in this agreement. It is agreed
Signature:	Date:	Signature:		Date:
	For Office	e Use Only		
Deposit Amount: \$ Pa	yment Type:	Landlord on File:	Yes/No	Accnt #:
Begin Read Tra	ansmitter#	Meter Ser #		Bin #: