

APPLICATION FOR UTILITY SERVICE

APPLICANT'S NAMES _____

THIRD PARTY _____

SERVICE ADDRESS _____

APPLICANT'S EMPLOYER _____
(Name) (Phone)

APPLICANT'S MAILING ADDRESS _____
(If different from Line 3)

Phone # _____ 2nd Phone # _____

SERVICE TO BE CONNECTED _____ AT _____ O'Clock

Electric (100) _____ Water (25) _____ Gas (75) _____ Sewer(#) person _____

DEPOSIT REQUIRED \$ _____ DEPOSIT TRANSFERRED FROM _____

OWNER'S NAME _____

Contracts with the Wahoo Utilities for service are not transferable. Any customer of the Wahoo Utilities changing from one location to another must make a new application and sign a new contract. The Wahoo Utilities does not guarantee the delivery of utility service over its distribution system at any time, to any person, except when its distribution system and connections are in good working order and it has sufficient supply, equipment and machinery to do so. The Wahoo Utilities and their employees shall have access at all reasonable hours to premises in which utility service is being used to determine if it is being carried, distributed and used in the proper manner. The owner or tenant of premises where metering is located shall provide ready and convenient access to the metering so that it may easily be examined and read by the Utilities or its employees. All utility service furnished consumers of the municipal electric, gas and water system of the Wahoo Utilities shall be measured by meters of such types as approved the Utilities Manager. All meters required shall be furnished, set in place and shall remain the property of the Utilities.

The rates to be charged by the Utilities for the service shall be such as the Council shall prescribe by resolution or ordinance. In the event of non-payment, service may be disconnected in accordance with the Utility Procedural Policy. All applicants shall be required to accompany their application with a service deposit which may be held indefinitely by the Utilities to guarantee payment of any utility bill.

I have read and understand the above information.

Date: _____ SSN _____
(Applicant's Signature)

Date: _____ SSN _____
(Applicant's Signature)

Date: _____ SSN _____
(Applicant's Signature)

PLEASE NOTICE - Identity Theft Prevention – effective May 1, 2009
Only persons on the Utility Billing will be able to get any information. No Utility billing information will be shared without the permission of the Applicant. Social Security numbers will help us protect your utility account.