

City of Hazleton

APPLICATION FOR UTILITY SERVICE

****MUST BE 18 YEARS OF AGE****

DATE _____

APPLICANT'S NAME _____

SPOUSE'S NAME _____

SOCIAL SECURITY # _____

BILLING ADDRESS _____

PHONE/CELL PHONE _____

CURRENT EMPLOYER _____

FORMER ADDRESS _____

PREVIOUS UTILITY COMPANY _____

UTILITY CO. ADDRESS _____

I hereby apply for utility services for the premises listed above beginning _____, 20 _____. Pursuant to the rules of the utility, I agree to pay all bills rendered by the utility until I give notice to the utility to discontinue services. If account becomes delinquent, customer will be responsible for any collection costs with recovery of the debt.

APPLICANT'S SIGNATURE

GARBAGE CONTAINER 64 GALLON _____ 34 GALLON _____

HOMEOWNER'S NAME _____

HOMEOWNER'S ADDRESS _____

DEPOSIT \$ _____

DATE PAID _____

DATE DEPOSIT RETURNED _____

OFFICE INFORMATION ONLY

COMPUTER CHANGE _____