TOWN OF BLACK CREEK APPLICATION FOR PUBLIC UTILITIES

Application Number:	Date:
Account #:	
Occata an an Maria	Date of Dinth.
Customer Name:	Date of Birth:
Social Security #:	Driver's License #:
Home Phone #:	Cell Phone #:
Employer:	Work Phone #:
Co-applicant's Name:	Date of Birth:
Social Security #:	Driver's License #:
Employer:	Work Phone #:
Cell Phone #:	
1American Indian/Alaska	us to collect the following demographic information: an NativeAsianBlack or African American /Pacific IslanderWhiteOther _Not Hispanic or Latino
Service Address:	
Mailing Address (if Different):	
Previous Address:	
Utilities applied for: EL WA	Deposit Amount: \$ Receipt #
PLEASE READ CAREFULLY:	
	sponsible for any Electrical or Water/Sewer Damages. We
recommend the customer be home	
• • •	e month, after which they become delinquent. Services will
	ss day after the due date unless it falls on a Friday which
then reverts back to Thursday, with	
3. If your utilities are disconnected du	e to non-payment and it is not paid by the next billing date,
	account. If you wish to continue services after the deposit
	ling balances and a new and current deposit will have to be
paid.	
4. The Town of Black Creek reserves	the right to check your past utility credit record.
You are	responsible for all collection fees
Customer Signature:	Town of Black Creek:
	By:
	Title:
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^{**}This institution is an equal opportunity provider, employer and lender**