



Request for Service

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Service Address: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Mailing address: _____

Social Security Number: _____ Driver's License Number: _____

Service Activation Date: _____ Owner or Renting? _____

Owner Information

(Section must be completed if applicant is not the owner)

Full Name: _____ Date: _____
Last First M.I.

Home Phone: _____ Cell Phone: _____ Email: _____

Mailing Address: _____

District Use Only

Old Account Number / Service ID: _____ New Account Number / Service ID: _____

Received By: _____ Date: _____ Adjustment Session Number: _____

Disclaimer and Signature

I understand that there will be a \$25.00 new account service fee. Payments are due in full at the end of every month. Failure to make payment by the end of the month may result in interruption of service and the account will incur a shut off and reactivation fee.

Signature: _____ Date: _____