



**CITY OF BLAKELY
RESIDENTIAL APPLICATION FOR UTILITY SERVICE**

Name: Last		First	Middle Initial	Date:
Service Address				
Special Mailing Address If Different From Service Address			Telephone Number	
Date of Birth			Social Security Number	
Services Requested: (Residential Deposit Rates)				
<input type="checkbox"/> Electric, \$100.00 Deposit		<input type="checkbox"/> Water, \$50.00 Deposit		<input type="checkbox"/> Security Light
<input type="checkbox"/> Gas, \$75.00 Deposit		<input type="checkbox"/> Sewage		<input type="checkbox"/> Garbage
Applicant's Employer			Telephone Number (Work)	
Employer's Address				
Spouse Or Roommate's Name		Social Security Number		Date of Birth
Spouse Or Roommate's Employer			Telephone Number (Work)	
Employer's Address				
Location Of Other Services In Your Name			Previous Service Location	
Nearest Relative's Name (Other Than Spouse)				Relationship
Address				Telephone Number
Do you wish to authorize another person to make inquiries or receive information regarding this account? Yes No If yes please list person's name and relationship.				
Failure to receive a bill does not eliminate your responsibility. All utility bills are due by the 10 th day of each month. Any account not paid in full by the 10 th will have a 10% late penalty added. This total amount is due by the 20 th of each month. Any account not paid in full by the 20 th will have an additional \$25.00 late fee added to the account and services will be disconnected. Once disconnected, accounts must be paid in full to be reconnected. Past due accounts will be turned over to a collection agency and any such costs for collection, attorney fees, and court costs will be added to the account. By signing this application I certify that the above information is true and correct. I understand that I am responsible for all utility services provided at the above service address and agree to the payment policy explained above. I also agree that in order for the City to service this account or collect any amounts I may owe that the City or their agents may contact me at the telephone number provided, including wireless numbers, which could result in charges to me. The City or their agents may also contact me by sending text messages or emails. Methods of contact may include pre-recorded/artificial voice messages and/or use of automatic dialing device, as applicable.				
Signature Of Applicant				Date
Signature Of Spouse or Roommate				Date
Application Taken By: (City Employee)				