## THE CITY OF BELLVILLE **APPLICATION FOR UTILITY SERVICES**

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**REVISED 9/2011** .

Hours: Monday through Friday 8:00 AM through 4:00 PM

24 Hour Phone Number (979) 865-3136

A deposit for utility service is required and MUST BE PAID prior to any connections. The minimum amount required for each service type will be collected. Upon termination of service, the deposit is applied to any payment which is due; refunds will be remitted to the named utility depositor. If an account becomes delinquent and is subject to disconnection, an additional deposit may be required.

The application below must be completed in full (PLEASE PRINT). If you have any questions, please do not hesitate to ask the clerk for assistance.

CHECK W	HICH ONE APPLIES TO Y	OU:HOME OWNERREN	ITERBUSINESSOTHER	
HAVE YOU	J EVER HAD UTILITIES V	NITH THE CITY OF BELLVILLE BEFO	RE:YESNO	
IF SO UND	DER WHAT NAME:			
NAME/DE	POSITOR:			
	(Last)	(First)	(M.I.)	
LANDLORI	DS NAME:			
UTILITY ADDRESS:			APT#:	
MAILING	ADDRESS (IF DIFFERENT	FROM UTILITY ADDRESS):		
CITY:		STATE:	ZIP:	
			STATE:	
EMPLOYER	S NAME:			
EMPLOYER	S ADDRESS:		PHONE #:	
DATE OF BIRTH:				
EMPLOYERS NAME:				
EMPLOYERS ADDRESS:			PHONE #:	
NEAREST R	ELATIVE NOT RESIDING	G WITH YOU:		
NAME:	NAME: RELATION:		ATION:	
			PHONE#:	
SIGNATURE:		DA	DATE:	
PLEASE BE AWARE THAT W BEGIN IMMEDIATELY. YOU	HEN THIS APPLICATION IS COMP WILL RECEIVE A UTILITY BILL FO CUPIED. IF THIS IS NOT YOUR UN	R AT LEAST THE MINIMUM AMOUNT CHARGED	AME: ARE TURNED ON IN YOUR NAME, UTILITY BILLING WILL FOR EACH SERVICE PLUS CONSUMPTION WHETHER OR WITH YOUR LANDLORD OR HOME BUILDER BEFORE	
REVISED 9/2011	OFFICE USE ONLY: DE	POSIT PAID \$		