

Account Number

Customer Name

APPLICATION FOR WATER SERVICES TO THE MUNICIPALITY OF ELK RIDGE, UTAH

Customer Name \_\_\_\_\_ Connect Date \_\_\_\_\_

Service Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Drivers License #-State \_\_\_\_\_

Social Security No. \_\_\_\_\_ Welfare Case Number \_\_\_\_\_

Spouse Name \_\_\_\_\_ Drivers License #-State \_\_\_\_\_

Social Security No. \_\_\_\_\_ Maiden or Other Name \_\_\_\_\_

Employer \_\_\_\_\_ Phone No. \_\_\_\_\_

Employer Address \_\_\_\_\_

Spouse Employer \_\_\_\_\_ Phone No. \_\_\_\_\_

Employer Address \_\_\_\_\_

Name of Relative \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_

Relationship Father  Mother  Son  Daughter  Other

Personal Reference \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_

Are You: Buying? \_\_\_\_\_ Renting? \_\_\_\_\_ Renting With Option To Buy? \_\_\_\_\_

If Renting - Owner \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_

Previous Address \_\_\_\_\_

Additional Information \_\_\_\_\_

Release is hereby given to the TOWN OF ELK RIDGE to obtain any and all such information from employer(s) or references as may be deemed necessary to process this application for service or to effect collection of any unpaid balance due. I may also be charged collection costs, or reasonable attorney fees, or a \$5.00 penalty. I, the undersigned, hereby certify that the information given above is true and correct.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Spouse Signature \_\_\_\_\_ Date \_\_\_\_\_

For Office Use Only:

Accepted By \_\_\_\_\_ Date \_\_\_\_\_

Deposit

Deposit Date \_\_\_\_\_ Amount \$110.00

Refund Date \_\_\_\_\_ Amount \$