

**CITY OF COWETA UTILITY SERVICE AGREEMENT**

Please Print Clearly

Residential Account # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Today's Date \_\_\_\_\_ Service Start Date \_\_\_\_\_ AM / PM \_\_\_\_\_

**APPLICANT** **Single / Joint Account** (circle one)  
**NAME** \_\_\_\_\_ Telephone # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

D.O.B. \_\_\_\_\_ SSN # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DR LIC # \_\_\_\_\_

**PRESENT ADDRESS** \_\_\_\_\_  
City State Zip Code

**SERVICE ADDRESS** \_\_\_\_\_  
City State Zip Code

OWN \_\_\_\_\_ RENT \_\_\_\_\_ Sub Division / Apartment Complex \_\_\_\_\_

Landlord \_\_\_\_\_ Landlord Telephone # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Name (Required) Name of

**MAILING ADDRESS** \_\_\_\_\_  
(If different from above) City State Zip Code

**EMPLOYER** \_\_\_\_\_ WK # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address City State Zip Code Occupation \_\_\_\_\_

**SPOUSE / CO-OCCUPANT'S**  
**NAME** \_\_\_\_\_ Relationship \_\_\_\_\_

D.O.B. \_\_\_\_\_ SSN # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DR LIC # \_\_\_\_\_

**EMPLOYER** \_\_\_\_\_ WK # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address City State Zip Code Occupation \_\_\_\_\_

LIST ALL OCCUPANTS NAMES  
THAT WILL BE RESIDING HERE \_\_\_\_\_

**PERSONAL REFERENCE** Telephone # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name Address City State Zip Code

Have you ever had service with the City of Coweta? YES \_\_\_\_\_ NO \_\_\_\_\_ When? \_\_\_\_\_  
At what address? \_\_\_\_\_

The undersigned agrees to pay the established utility rates as set forth in the City of Coweta ordinances and agrees to abide by the regulations and policies governing said services. This agreement becomes effective upon the establishment of service.

**RESPONSIBLE PARTY** \_\_\_\_\_  
Signature Date

DEPOSIT AMOUNT: Homeowners \$50.00 Renters \$100.00