

CITY OF EAST CARBON

101 W. GENEVA DR.
EAST CARBON, UTAH 84520

RESIDENTIAL APPLICATION FOR UTILITY SERVICE (Please answer all the questions)

CUSTOMER NAME _____ CONNECT DATE _____
SERVICE ADDRESS _____
MAILING ADDRESS _____
(Or where you can be reached)

PREVIOUS ADDRESS _____
TELEPHONE _____ DRIVERS LIC.# AND STATE _____
SOCIAL SECURITY # _____

EMPLOYER _____ EMPLOYER ADDRESS _____
WORK PHONE # _____ HOW LONG EMPLOYED _____

SPOUSE NAME _____ SPOUSE SOCIAL SECURITY # _____
SPOUSE/ROOMMATE EMPLOYER _____ WORK PHONE # _____

NAME OF RELATIVE _____ TELEPHONE # _____
ADDRESS _____ CITY, STATE _____
RELATIONSHIP: FATHER _____ MOTHER _____ SON _____
DAUGHTER _____ OTHER _____

REFERENCE _____ TELEPHONE # _____
REFERENCE ADDRESS _____ CITY, STATE _____

IF RENTING: OWNER OR MANAGER NAME _____
LANDLORD ADDRESS _____ TELEPHONE # _____

I understand that utility service billings are due when rendered and become delinquent thirty (30) days after billings. Should I become delinquent in payment of any such billings, East Carbon City shall have the right to demand payment of billing, suspend my utility service, or turn my account over to an outside collection agency which could involve court costs.

SIGNATURE OF APPLICANT _____
Date of Deposit _____ Amount of Deposit _____