



## Homeowner and Rental Utility Application

\*\*\*A valid copy of a driver's license and/or identification card is required with this application.

**Service Address:** \_\_\_\_\_

Services needed:                      Water \_\_\_\_\_ Gas \_\_\_\_\_ Sewer \_\_\_\_\_ Sanitation \_\_\_\_\_

Primary Application Information:

Name: \_\_\_\_\_

First

Middle

Last

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

City, State

Zip Code

Email address: \_\_\_\_\_

Social Security: \_\_\_\_\_ Driver's License: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Home/Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Current Employer: \_\_\_\_\_ Years: \_\_\_\_\_

Employer Address: \_\_\_\_\_ Employer Phone: \_\_\_\_\_

1<sup>st</sup> Time Service with the City of Fort Stockton: YES \_\_\_ NO \_\_\_

If no, previous address: \_\_\_\_\_

### If Renting:

Landlord's Name: \_\_\_\_\_ Landlord Phone: \_\_\_\_\_

Landlord Address: \_\_\_\_\_

City, State

Zip Code



**Personal References, please list two:**

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Name	Address	Phone Number
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Name	Address	Phone Number
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**I understand that I will be responsible for payment of utilities at the above address. I also authorize a credit check to determine deposit required, if I am a homeowner. I am aware if I am a renter a \$275.00 deposit is required. The deposit is automatically credited to the account after *12 months of excellent history* or when the account is closed. If a credit balance remains after the final billing on a closed account, it will be refunded.**

**I also understand payment is due by the 10<sup>th</sup>, and additional penalties will accrue if not paid by the 20<sup>th</sup>. Accounts that remain unpaid will be subject to disconnection.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_