

APPLICATION FOR UTILITY FOR THE TOWN OF KENTWOOD

SERVICE ADDRESS: _____ RESIDENTIAL/COMMERCIAL
 (CIRCLE ONE)

APPLICANT INFORMATION:

NAME: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____

SS NUMBER: _____

DRIVER'S LIC#: _____ STATE: _____

EMPLOYER: _____

PROPERTY OWNER INFORMATION:

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

"The following information is requested by the Federal Government in order to monitor compliance with the Federal laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This will not be used in evaluating your application, or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of persons/applicants on the basis of visual observation or surname."

PLEASE CIRCLE GENDER AND RACE

MALE/FEMALE

- | | | |
|---|-----------------|------------------------|
| Black or African American | American Indian | Non Hispanic or Latino |
| White | Alaskan Native | Hispanic or Latino |
| Asian | Latino | |
| Native Hawaiian or other Pacific Islander | | |

APPLICANTS SIGNATURE: _____

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OFFICE USE ONLY ACCOUNT TYPE: NEW/ CHANGE/ FINAL/ REACTIVATE

DATE OF APPLICATION: _____ PREPARED BY: _____

ACCOUNT NUMBER: _____ TYPE: RES/COMM/NO TAX/IND

PRIOR TENANT NAME: _____ ACCT# _____

SERVICES APPLIED FOR:

GAS _____	WATER _____	SEWER _____	SANI _____
DEPOSIT# _____ \$ _____	DEPOSIT# _____ \$ _____	YES/NO _____	COMM/RES _____
METER# _____	METER# _____	PRESSURE CHECK: _____	
READING _____	READING _____	DATE: _____ BY: _____ PD: _____	
PRV READING _____	PRV READING _____		

METER NEEDS TO BE INSTALLED YES/NO _____

WORK ASSIGNED TO: _____ WORK COMPLETED BY: _____ DATE COMPLETED: _____