



Application for Utility Service

Date \_\_\_\_\_ Service Start Date \_\_\_\_\_

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

Name \_\_\_\_\_ Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ SSN \_\_\_\_\_

Drivers Lic. No. \_\_\_\_\_ Email \_\_\_\_\_

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

Employers Name \_\_\_\_\_

Employers Address \_\_\_\_\_

Employers Phone \_\_\_\_\_

Co-Applicant \_\_\_\_\_ Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ SSN \_\_\_\_\_

Drivers Lic. No. \_\_\_\_\_ Email \_\_\_\_\_

Is this for a commercial/business account? Yes \_\_\_\_\_ No \_\_\_\_\_

Name, Address, and Phone Number of Nearest Relative/Friend (not living with you)

\_\_\_\_\_

Do you Own? \_\_\_\_\_ Rent? \_\_\_\_\_

Landlord Name & Phone \_\_\_\_\_

Location of Actual Gas Meter \_\_\_\_\_

Gas is used for Hot water heater \_\_\_\_\_ Furnance \_\_\_\_\_ Stove \_\_\_\_\_ Dryer \_\_\_\_\_

List type of life support used (i.e. oxygen) \_\_\_\_\_

I, the undersigned, hereby make my application to the City of Benson for utility services and agree to pay for such services at the regular published rates in accordance with the applicable rules of the City of Benson. I agree to pay for such service, until I notify the City in writing of desired service disconnect. I agree that the City of Benson or a representative may discontinue service without further notice to me in the event of failure on my part to comply with the terms and conditions of the agreement. I agree deposits, which are paid for the purpose of utility services, will at the time of disconnect be applied to my final bill. Amount to be refunded, if any, will be paid by check to the person(s) whose name(s) appear on this account. The co-applicant has the same rights and responsibilities if on the account. I understand that I am responsible for lighting my own gas pilots if requesting gas service.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Co Applicant Signature

OFFICIAL USE ONLY

Service Address \_\_\_\_\_ Customer # \_\_\_\_\_