

OFFICE USE ONLY! Account Number: _____

****DEPOSIT AMOUNT \$** _____ WATER ELECTRIC GAS

CITY OF MONTICELLO
APPLICATION FOR SERVICE

CUSTOMER NAME: _____

SERVICE ADDRESS: _____

MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

START SERVICE ON: _____ TRANSFER: YES/NO DISCONNECT DATE: _____

PREVIOUS ADDRESS: _____

HOME #: _____ SSN: _____

WORK #: _____ DRIVERS LIC #: _____

CELL #: _____ DATE OF BIRTH: _____

EMAIL: _____

EMPLOYER NAME & ADDRESS

REFERENCE: (preferable a relative, if living in GA) NAME: _____

RELATIONSHIP: _____ ADDRESS: _____

PHONE #: _____ CITY, STATE, ZIP: _____

To induce City of Monticello Utility Department to accept this application, the Applicant unconditionally agrees to comply with all the City of Monticello rules and regulations, and to promptly pay for all utility used. This includes all late fees and other charges as they may apply. The Applicant further acknowledges sole responsibility for any accrued cost by the City of Monticello to cause replacement or repair to Applicant's utility service due to damage and/or tampering.

SIGNATURE: _____ DATE: _____

***Return the completed application, a copy of your driver's license, a copy of your social security card, a copy of your settlement statement or lease agreement, along with a check or money order for your deposit (depending on your credit score) to the City of Monticello, P.O. Box 269, Monticello, GA 31064 or you can come to our office located at 123 West Washington Street, Monticello, GA 31064 to apply for service. You can also fax the requested information to 706-468-1041 and then a Customer Service Representative will contact you for your credit card information. We will need to complete your application one day before the service should be put into your name because we are next day service. ***