

VILLAGE OF FORT LORAMIE

RESIDENTIAL UTILITY APPLICATION AND TAX REGISTRATION

DATE: _____ **EFFECTIVE DATE OF SERVICE** _____ **ACCT#:** _____

Name of Applicant: _____

Service Address: _____ Phone: _____

Mailing Address: _____ Email: _____

Do you want to use paperless billing? _____ Yes _____ No

(By choosing yes, paperless, you will not receive a printed bill. You will receive your bill via email.)

Social Security # of Applicant: _____ Applicant Employer: _____

Spouse's Name: _____ Spouse's SS#: _____ Spouse's Employers: _____

Last Address of Applicant: _____

Have you ever had village utilities in your name before: _____ If yes, where? _____

I am renting _____ buying _____ this property.

If renting or leasing please provide:

Name of Owner: _____ Address of Owner: _____

Please list other members of household 18 years of age and over:

Name: _____ SS#: _____ Employer: _____

I the undersigned do understand and agree that:

- (1) All utility bills are due and payable by the 23rd of each month billed.
- (2) Non-payment of bills when due will result in discontinuation of service.
- (3) A reconnection charge of \$60.00 will be paid along with outstanding bill before service is reconnected.
- (4) If I, my spouse, or any member of my household owes the Village of Fort Loramie any past due, delinquent bills, all of these bills must be paid in full before any service is provided at the above service address and that if after this service is provided it is found that such a bill exist, service will be discontinued at once and until payment of such is made in full.
- (5) My utility deposit will be returned, upon application, after 12 months, if all bills against my account have been paid no later than 23rd of each month in which the bill is rendered (this applies to residential deposits only).
- (6) I also understand that my below signature represents a consent for release of information pertaining of myself or those listed on the form.

Signature of Applicant: _____ Date: _____

*****Deposit \$100 _____ Check _____ Cash