



CASH SPECIAL UTILITY DISTRICT

SERVICE APPLICATION

PLEASE PRINT:

DATE: _____

Owner ☐ Renter ☐

APPLICANT'S NAME: _____

SPOUSE'S NAME: _____

NUMBER OF PERSONS IN HOUSEHOLD: _____

BILLING ADDRESS:

PHONE NUMBERS:

(____) _____

(____) _____

EMAIL ADDRESS: _____

☐ CHECK HERE TO RECEIVE YOUR BILL BY EMAIL ONLY.

PROPERTY OWNER'S NAME IF RENTING: _____

PREVIOUS OWNER'S NAME: _____

TYPE OF PROPERTY: (*Choose ONE*): Residential ☐ Commercial ☐ Industrial ☐

LOCATION OF PROPERTY: _____

IS METER LOCATED ON THIS PROPERTY: _____

UNLOCK METER: TURN ON ☐ LEAVE OFF ☐ FLAG METER ☐

PIN: _____ (4 DIGIT CODE YOU WILL REMEMBER)

CODE ABOVE MAY BE USED TO CONFIRM IDENTITY BY PHONE AND ONLINE

GATE CODE: _____ (USED TO MANUALLY READ METER OR REPAIRS)

(OFFICE USE ONLY. THIS IS NOT A RECEIPT)

ACCOUNT #: _____ GRID #: _____ C1 ☐ C2 ☐ C3 ☐ C4 ☐

RE-SERVICE: _____ FEE: _____ DATE PAID: _____

NEW SERVICE: _____ FEE: _____ DATE PAID: _____

Line Ext. ☐ Road Bore: ☐ Hwy Bore ☐ Payment Contract: ☐

MUST PROVIDE: _____ PROOF OF OWNERSHIP OR _____ LEASE AGREEMENT

RESERVICE FEE: \$260.00 CASH, CHECK, OR MONEY ORDER