

Security Deposit \$80.00

The City of Anderson Application for Utility Service

Name: _____

Mailing Address: _____

Telephone: _____

Social Security #: _____

Physical Address of Residence/Business: _____

Private Residence Commercial Business Inside City Limits Outside City Limits

Own Rent Name of property owner: _____

Service Requested: Water Sewer Trash (available inside city limits)

Joint Tenant Information Spouse/roommate/other individual who shares responsibility for bills for this residence/business:

Name: _____ Social Security #: _____

Number of residents: _____ Do you own a dog? Yes No

Will residents include individuals with special needs? infants disabled elderly

References Name, address & telephone number of a friend or relative not living with you: _____

Have you or anyone living with you ever had water service in Anderson? If yes, list the name(s) of persons who had service: No Yes _____

Address you last lived: _____

I understand water bills are due by the 21st of each month. I understand that if I do not pay my water bill on time, my water may be shut off and not be turned back on until I have paid my bill in full plus a \$20.00 reconnect fee.

Signature Date

For Office Use Only:

Meter Location: _____	Deposit Due: _____
Meter Serial #: _____	Deposit Amt Pd: _____
Meter Reading: _____	Deposit Date: _____
Date of Reading: _____	Pd by: <input type="checkbox"/> Cash <input type="checkbox"/> Check (check #) _____
Acct. #: _____ Entered: _____	Taken by: _____