

# CITY OF LAFAYETTE

## APPLICATION FOR UTILITIES FOR RESIDENCE

**You must show proper identification, rent receipt or owner's papers.**

Full name \_\_\_\_\_ Spouse's name \_\_\_\_\_

Social Security number \_\_\_\_\_ Spouse's Social Security number \_\_\_\_\_

Utility address \_\_\_\_\_ Check one: Rent \_\_\_ Own \_\_\_

Mailing address \_\_\_\_\_

Phone Number \_\_\_\_\_

Utilities requested: Electricity \_\_\_ Water \_\_\_ Natural gas \_\_\_ Sanitation \_\_\_

Previous/current address: \_\_\_\_\_

Have you or your spouse ever had utilities with the city before? \_\_\_\_\_

If yes, when and in what name? \_\_\_\_\_

List other people over 18 years living in the residence \_\_\_\_\_

Name of last residents at this address \_\_\_\_\_

Where are you employed? \_\_\_\_\_ Previous employer \_\_\_\_\_

Landlord's name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

### **Please, read carefully.**

I understand that my utility bill will be due on the \_\_\_\_\_ of each month and should be paid within 15 days and a late charge of 10 percent will be added after the due date. Service will be disconnected if not paid within 20 days from the date the bill is mailed. A connection fee will be charged before utilities will be turned back on. Utilities will be disconnected upon finding that the structure served has been or is being used for the manufacturing of any controlled substance, as provided by Sec. 21-27 et seq. Code of Ordinance.

**Notice:** A false statement in this application could result in disconnection of power!  
I have received a copy of the underground gas piping maintenance form.

Date \_\_\_\_\_ Customer's signature \_\_\_\_\_

### **Office use only**

Deposit number \_\_\_\_\_ Date \_\_\_\_\_ Clerk's signature \_\_\_\_\_

Bad debt shown \_\_\_\_\_ Amount due \_\_\_\_\_ Amount paid \_\_\_\_\_

Remarks \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_