

**APPLICATION & CONTRACT
FOR UTILITY SERVICES WITH
THE CITY OF MT. VERNON**

****A meter deposit of \$100.00 is required when this application is submitted.****

Date _____ Date Service Is To Begin _____

Name _____
(Last) (First) (M Initial)

Address _____
(Service Address)

Billing Address (if different)

Social Security Number _____

Spouse/Roommate Name _____ SS # _____

Phone _____
(Home) (Cell) (Other)

Place of Employment _____

Do you own _____ or rent** _____ the property?

**Landlord Name/Address _____

CONTRACT

The undersigned applicant hereby applies for utility services from the City of Mt. Vernon and agrees to abide by the rules, regulations and procedures as set forth by the City of Mt. Vernon Council Members. I acknowledge that I have read, and understand, this contract and the utility procedures. I will be responsible for all bills and charges against this service until I notify the City of Mt. Vernon that the utilities are no longer desired.

Signature

Date

.....
Office Use Only

Deposit Received By _____ New Account Number _____

Prior Account Number _____ Last Meter Reading _____

Serial Number _____ Location # _____