

APPLICATION FOR UTILITY SERVICE

Date of Application \_\_\_\_\_

Account # \_\_\_\_\_

Applicant 1

Name \_\_\_\_\_

SSN or EIN \_\_\_\_\_

Service Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Previous Address \_\_\_\_\_

Current Employer \_\_\_\_\_

Mobile Phone \_\_\_\_\_

Home Phone \_\_\_\_\_

Email \_\_\_\_\_

Are you 18 years of age or older?  Yes  No

If no, are you an emancipated minor?  Yes  No

Have you ever had service with this Utility before?  Yes  No

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

Applicant 2

Name \_\_\_\_\_

SSN or EIN \_\_\_\_\_

Previous Address \_\_\_\_\_

Current Employer \_\_\_\_\_

Mobile Phone \_\_\_\_\_

Home Phone \_\_\_\_\_

Email \_\_\_\_\_

Are you 18 years of age or older?  Yes  No

If no, are you an emancipated minor?  Yes  No

Have you ever had service with this Utility before?  Yes  No

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

Please select one of the following:

Tenant Landlord Name \_\_\_\_\_ Landlord Phone \_\_\_\_\_

Contract for Deed Date of Purchase \_\_\_\_\_ Purchased From \_\_\_\_\_

Property Owner Date of Purchase \_\_\_\_\_ Purchased From \_\_\_\_\_

I hereby request utility service from the Department of Public Utilities in Virginia, MN for the service address above. I agree to pay all charges for such service on or before the due date printed on the bill. I also agree to use said electricity, water, gas, steam and meters strictly in accordance with the Rules and Regulations of said Department and adhere to all other rules and regulations as though printed hereon in full. I hereby certify the above information I have provided is correct and true.

Applicant 1 Signature \_\_\_\_\_

Applicant 2 Signature \_\_\_\_\_

Printed Name & Title of Authorized Representative (if under business name) \_\_\_\_\_

Utility Use Only

Photo ID  Previous Account  Write-Off List  Service Order Created  Ownership Doc  Property Mgmt Doc

Deposit # \_\_\_\_\_ Deposit Paid by \_\_\_\_\_  Guaranteed Application Taken by \_\_\_\_\_