



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