



Utility Service Agreement

BASIC INFORMATION	Applicant Name: _____		
	Co-Applicant Name (must be present): _____		
	Service Address: _____		
	Date Service Needed: _____		Phone Number: (____) _____
	Mailing Address: _____		
	E-mail: _____	<input type="checkbox"/> E-Notification with Printed Bill <input type="checkbox"/> E-Notification without Printed Bill	
Employer: _____	<input type="checkbox"/> Own	<input type="checkbox"/> Rent	<input type="checkbox"/> Manage

CREDIT INFORMATION	<u>Applicant:</u>		
	Driver's License/Passport Number: _____	State/Country: _____	
	Social Security Number: _____	Birth Date: _____	
	<u>Co-Applicant:</u>		
Driver's License/Passport Number: _____	State/Country: _____		
Social Security Number: _____	Birth Date: _____		

CONTACT	<u>Third Party Contact:</u> (not residing at service address)		
	Name: _____	Phone Number: (____) _____	
	Address: _____	Relationship: _____	

AGREEMENT	<p>The undersigned certifies that all information contained herein is true and correct. The customer agrees to pay for such services at the rates, times, and in the manner now and hereafter established by the City of Bentonville, Arkansas. Customer agrees to abide by all ordinances, regulations and Terms and Conditions of Service governing utility service with the City of Bentonville, Arkansas as may now or hereafter be adopted. Your credit file may be accessed to verify your identity in order to comply with the Fair and Accurate Credit Transactions Act and/or to establish your security deposit amount.</p>		
	Applicant Signature: _____	Date: _____	
	Co-Applicant Signature: _____	Date: _____	

CITY USE ONLY	City Representative's Signature: _____ Date: _____		
	Account Number: _____	Deposit Amount: \$ _____	
	Past Due Account Number: _____	Past Due Amount: \$ _____	
	Identity Verification Report Number: _____	SV: _____	SA: _____ GA: _____
	Collection Agency Notification: Initials: _____ Date: _____	Agency Member's Name: _____	

RESIDENTIAL