

Account No. _____

Today's Date _____

Service Date _____

APPLICATION FOR UTILITY SERVICE
VILLAGE OF CLINTON
119 E. MICHIGAN AVE., CLINTON, MICHIGAN 49236
(517) 456-7494

I, _____ address _____

Do hereby apply for Service from the Village of Clinton. In applying for utilities and upon acceptance of my application by the Village of Clinton, I/we agree to obtain all my electric, water and sewer from the Village, abide by all rules, and regulations, and rate adjustments approved by the Village. Service desired for which of the following utilities:

Electric () yes
() no

Water () yes
() no

Sewer () yes
() no

Utility Deposit Amount: _____ Electric Deposit
_____ Water Deposit
_____ Sewer Deposit
_____ Total Amount

Owner of Above Address: Yes () No ()

Previous Address _____

City/State _____

Type of Dwelling: Residential _____
Apartment No. _____

Commercial _____
Industrial _____

Employer _____

Employer's Address _____

Charges to be billed to: Name _____ Day Phone _____

Address _____ Night Phone _____

SS# _____

Driver's License # _____

Signed _____ Date _____

Village Representative _____