NO: _____
SO: _____

APPLICATION FOR UTILITY

Residential Account ☐ Name Change Only ☐ 72 Hour Account ☐
Date to Open Account: _____ Account Number: _____
Name: _____Gender: M ☐ or F ☐
Social Security #: _____ Driver's License or ID: _____ State: _____
Date of Birth: _____ Home Phone: _____ Work Phone: _____
Employer's Name: _____

Co-Applicant: _____Gender : M ☐ or F ☐
Social Security #: _____ Driver's License or ID: _____ State: _____
Date of Birth: _____ Home Phone: _____ Work Phone: _____
Employer's Name: _____
Do you rent ☐ or own ☐ Landlord's Name: _____ Phone: _____

Service Address: _____
Mailing Address: _____

Water Deposit Amount $100.00 Connection Fee $20.00 Amount Paid: _____
Payment Method: Cash ☐ Credit Card ☐ Card Type: _____
Check ☐ Check #_____ Bank _____

Commercial Date to Open Account:_____
Name of Company or Business: _____
Legal Representative: _____
Driver's License: _____ Social Security: _____
Federal Tax ID#: _____ Phone Number: _____
Service Address: _____
Mailing Address: _____

A SERVICE DEPOSIT SHALL BE REQUIRED WHICH SHALL BE EQUAL TO AN ESTIMATE OF THE COST OF SIXTY (60) DAYS UTILITY SERVICE, WITH A ONE HUNDRED DOLLAR ($100.00) MINIMUM DEPOSIT. THE AMOUNT OF THE DEPOSIT SHALL BE ESTIMATED BY THE UTILITY BILLING CLERK OR HIS OR HER AUTHORIZED REPRESENTATIVE WHERE BILLING FIGURES FOR A COMPARABLE ESTABLISHMENT IS NOT AVAILABLE.

Water Deposit Amount: _____ Connection Fee: $20.00 Amount Paid: _____
Payment Method: Cash ☐ Credit Card ☐ Card Type: _____
Check ☐ Check #_____ Bank _____

_____ _____
Applicant Signature Date Co-Applicant Signature Date

_____
Water Department Approval Date

Do you wish your personal information to be confidential? Yes ☐ No ☐

City of Stephenville * 298 West Washington * Stephenville, TX 76401
Phone Number (254) 918-1220 * Fax Number (254) 918-1207