

## **Utility Service Application**

Last name	First name	MI	suffix	SSN	D	OB/Age	
Service Address	City		St	State		zipcode	
Previous Address	City			State		zipcode	
Telephone number	Cell Phone number						
Current Employer	Occupation			City		State	
Spouse Last name	First na	ime	MI	suffix	SSN	DOB/Age	
Deposit Gas \$200 Water \$100	Signature						
Please indicate if : Residential Business		Date *** Customers with good payment history (no penalties) will be refunded/credited deposits after one year.					

Applications can be faxed to 706-377-2447, please include a picture Id and a Rental leases Form or proof of ownership for property.