

Account # _____

Customer # _____

**City and Borough of Sitka
"OWNER" Utilities Application (Fax 747-4779)**

Applicant Name (Last, First, MI) _____
 Previous Name(s)/Maiden name _____ Tax Exempt? Y / N
 Location of Service _____
 Mailing Address _____
 Social Security # _____ Drivers Lic. # & State _____
 Home & Cell Phone # _____ Date of Birth _____
 Employer & Address _____
 Employer Phone # _____ Date of Hire _____
 Is this location occupied at this time? _____
 Will you be responsible for paying the utilities once the unit is occupied? _____

To be completed by Service Representative	
Deposit Required:	
<input type="checkbox"/> Yes (\$150.00)	<input type="checkbox"/> No
Deposit No. _____	
<input type="checkbox"/> Blue Binder	
<input type="checkbox"/> Previous UT Final Bills	
<input type="checkbox"/> Photo ID	
Per (initials) _____	
Credit Manager _____	
Effective Date _____	

Co-Applicant Name (Last, First, MI) _____
 Previous Name(s)/Maiden name _____
 Social Security # _____ Drivers Lic. # & State _____
 Home & Cell Phone # _____ Date of Birth _____
 Employer & Address _____
 Employer Phone # _____ Date of Hire _____

The undersigned certifies that he/she is the owner of the premise where service is applied for with lawful authority to sign this application for utility service and agrees to pay the applicable rates and abide by the terms and conditions as prescribed in the Customer Service Policy and abide by the Municipal Ordinances applicable for all present and future utility service. Acceptance of the application by the Municipality of Sitka constitutes a contract between the Municipality and applicant. All costs incurred by the Municipality for the collection of any unpaid account shall be paid by the applicant. The information furnished on the application, including you social security numbers, are voluntary and will be used to determine if a deposit will be required. Your signature in the designated space authorizes the Municipality to conduct a credit check if such action is necessary in order to determine possible deposit requirements. Failure to provide information will automatically require a deposit.

I hereby declare that the information provided is true, accurate and complete to the best of my knowledge and belief, and is voluntarily submitted for the purpose of receiving utility service. It is understood that upon presentation of the application it becomes the property of the Municipality.

Application's Signature _____ **Date** _____

Co-Applicant's Signature _____ **Date** _____