

ROCK FALLS UTILITIES APPLICATION FOR SERVICE AND DEPOSIT RECORD

DATE _____

ACCOUNT NO. _____ SERVICE ADDRESS _____

APPLICANT NAME _____ SS# _____ PHONE # _____

CO-APPLICANT NAME _____ SS# _____ PHONE # _____

MAILING ADDRESS _____

EMERGENCY CONTACT _____ PHONE # _____

SERVICES PROVIDED ELECTRIC _____ WATER _____ SEWER _____ GARBAGE _____

OPTIONAL SERVICES URBAN LIGHTS _____ INTERNET _____

DEPOSIT AMOUNT \$ _____ RECEIVED BY _____

APPLICANT SIGNATURE _____

CO-APPLICANT SIGNATURE _____

OWNER/LANDLORD _____ BLANKET DEP YES _____ NO _____

TENANT AUTHORIZATION TO RELEASE INFORMATION

I/WE AUTHORIZE ROCK FALLS UTILITIES TO RELEASE MY ACCOUNT INFORMATION TO THE OWNER/LANDLORD. ACCOUNT INFORMATION INCLUDES: ACCOUNT BALANCE, NOTICE OF DISCONNECTION OF SERVICES, BILLING, WORK/SERVICE ORDER HISTORY AND USAGE HISTORY.

APPLICANT SIGNATURE _____ DATE _____

CO-APPLICANT SIGNATURE _____ DATE _____

ROCK FALLS UTILITIES DEPOSIT RECEIPT

ACCOUNT NAME _____

ACCOUNT NO. _____ SERVICE ADDRESS _____

SERVICES PROVIDED ELECTRIC _____ WATER _____ SEWER _____ GARBAGE _____

OPTIONAL SERVICES URBAN LIGHTS _____ INTERNET _____

DEPOSIT AMOUNT \$ _____ RECEIVED BY _____