



# City of Riverton

## Application for Utility Service

Account # _____
W.O. # _____
Reading _____

**CUSTOMER INFORMATION:**

Name		Eff. Date of Service (M-F)	
Service Address			
Mailing Address	City	State	Zip
Email Address		Telephone	

**IN THE EVENT OF EMERGENCY AND WE ARE UNABLE TO REACH YOU, WHOM MAY WE CONTACT?**

Name			
Mailing Address	City	State	Zip
Email Address		Telephone	

**EMPLOYMENT INFORMATION:**

Employer Name			
Mailing Address	City	State	Zip
Email Address		Telephone	

Did you:      purchase the property                      rent/lease the property

*If renting/leasing, please complete the section below. A refundable deposit of \$150 is required if you are renting/leasing the property. A \$10 transfer fee is charged for service transfer requests.*

Property Owner Name:	Telephone
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Do you wish to:

receive your bill via email?	Yes	No	Signature _____
sign up for curbside recycling?	Yes	No	Date _____
sign up for automatic payment?	Yes	No	

**OFFICE USE ONLY**

Effective Date of Cancellation			
Forwarding Address	City	State	Zip
Email Address		Telephone	
Notification Date	Notified By	Received By	DEP REF

Route/Seq. #	ECR #	MXU #	SA #	Employee ID

Rate Codes	Meter Information	Readings	Security Deposit	Transfer Fee	Tenant (Y/N)
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Comments: