

**Application for Residential Utility Service
Bainbridge Municipal Utilities**

Primary Name _____ Social Security # _____ - _____ - _____
Secondary Name _____ Social Security # _____ - _____ - _____
Mailing Address _____ City _____ State ____ Zip _____
Previous Address _____ City _____ State ____ Zip _____
Telephone # _____
Cell # _____

Utility Service Address _____
Utility Services Requested Electric ____ Gas ____ Water ____ Sewer ____

Employer _____ Employer Phone # _____

Property Status

_____ Own/Contract

_____ Rent / Lease

Property Owner _____
Address _____

Telephone # _____

Emergency Contact Name _____ Telephone # _____

Requested Utility Connection Date _____

Office Use Only

Account # _____ Deposit # _____

Electric (\$50.00) _____
Total Electric (\$150.00) _____
Gas (\$100.00) _____
Water (\$40.00) _____
Sewer (\$40.00) _____

Total Deposit Amount \$ _____ .00