

Application for Utility Services

Resid	ential Co	ommercial	Industria	al	
Last Name		_First			MI:
Driver's License Number		Issuing State	SS#		
Service Address		City		State	Zip
Mailing Address		City		State	Zip
Phone	Email				
Emergency Contact (1)					
Emergency Contact (2)					
Company Name					
Company Tax ID	Comp	_ Company Accounting Contact			
Company Accounting Phor	e Number	Email			
Is anyone in your home/bus	siness chronically o	or seriously ill, han	dicapped	or on a li	ife support
system? Yes No	0				

If yes, please see The Town of Landis New Customer Packet for needed documentation

Utility Services Agreement

Note: You must provide a (1) Valid State or Government Issued Photo ID, (2) Social Security Card, (3) Valid Lease Agreement or Proof of Property Ownership before Services are Started.

Agreement for Services with Town of Landis Utilities

It is hereby agreed that the undersigned will accept billing and be responsible for the utility charges accrued at the location described above as the "Service Address". This obligation will continue until such time that the signing party gives written notice in the form of a request to disconnect service to this office. If the collection of any delinquent charges is necessary, the signer agrees to be responsible for past due amounts and all costs accrued in the collection process, including disconnection fees, delinquent charges, legal fees along with processing and court costs. This application for Utility Services shall constitute a service contract between the Applicant and Town of Landis Utilities, and the Applicant agrees to pay and is bound by the rules and regulations of The Town of Landis Utilities.

Signature _____ Date _____