## VILLAGE OF GREENUP APPLICATION FOR UTILITY SERVICE RESIDENTIAL

## ALL BLANKS MUST BE COMPLETED BEFORE SERVICES WILL BE PROVIDED PLEASE PRINT

Name:	Name:
(maiden name)	(maiden name)
SS#	SS#
Drivers License #	Drivers License#
Copy of Drivers License or Photo ID	Copy of Drivers License or Photo ID
Date of Birth	Date of Birth
Employer	Employer
Previous Address	Previous Address
Service Address	Mailing Address
Phone	Phone
Name of all other occupants at this Residence:	Nearest relative NOT living with Applicant:
Account #	

We/I the undersigned agree to comply with the ordinances, regulations, and policies of the Village of Greenup. WE/I HEREBY ACKNOWLEDGE AND AGREE THAT PAYMENTS WILL BE MADE ON THIS ACCOUNT IN ACCORDANCE WITH THE TERMS ON THE MONTHLY STATEMENT AND TO PAY ANY LATE PAY PENALTIES OR RECONNECT FEES AS ASSESSED. IN THE EVENT PAYMENT IS NOT MADE PROMPTLY AND IT BECOMES NECESSARY TO INSTITUTE COLLECTION PROCEDURES INCLUDING LITIGATION, WE/I AGREE TO PAY REASONABLE FEES PLUS OTHER COSTS NECESSARILY INCURRED IN THE COLLECTION OF THIS ACCOUNT. IN THE EVENT WE ARE IN RECEIPT OF A DISCONNECT NOTICE, I/WE AGREE THE VILLAGE WILL BE DISCLOSING THE DISCONNECT TO THE PROPERTY OWNER.