UTILITY CONTRACT FOR SERVICE

APPLICANT	CO-OCCUPANT	7-4	DATE	
PREVIOUS UTILITY ACCOUNTS V LOCATION OF SERVICE:	VITH THE CITY OF MANNFORD:		DATE	
REFERENCE RELATIONSHIP		TELE. # CELL #		
CO-OCCUPANT EMPLOYER NAME EMPLOYER ADDRESS E-MAIL ADDRESS		S.S. # D.L. # TELE. # WK #		1
APPLICANT NAME SERVICE ADDRESS MAILING ADDRESS EMPLOYER NAME EMPLOYER ADDRESS E-MAIL ADDRESS		S.S. # D.L. # TELE. # CELL # WK #		

SIGNATURE SIGNATURE

The Undersigned agrees to pay the established rates set forth by the city of Mannford ordinances and agrees to regulations governing said services. This application becomes a contract upon the establishment of services. It is also understood that the City of Mannford will not be held liable for any damages or inconvenience cased by utility service interruptions.