



***** DEPOSIT IS DUE BEFORE SERVICE WILL BE CONNECTED *****

Date of Application: _____ Effective Date of Service: _____

Clerk: _____

Customer Name: _____

Co – Applicant Name: _____

Service Address: _____

Transfer from another address in Altavista? Yes / No

If yes, where? _____

Mailing Address: _____

City / State / Zip: _____

Previous Address: _____

APPLICANT	CO-APPLICANT
Home Phone: _____	Home Phone: _____
Work Phone: _____	Work Phone: _____
SS# or Drv Lics #: _____	SS# or Drv Lics #: _____
Date of Birth: _____	Date of Birth: _____

Number of Occupants: _____ Will you OWN or RENT?

Is water currently on? _____

If renting, Landlords name: _____

I certify that I shall be responsible for payment of all utility bills due with respect to the above requested service. I also understand that I need to give notice to discontinue service when moving out.

X _____
Applicant

X _____
Co-Applicant