

TUPELO WATER & LIGHT DEPARTMENT

333 Court St./P.O. Box 588

Tupelo, MS 38802

Tel. 662-841-6470 / Fax 662-841-6471

RESIDENTIAL INFORMATION FOR UTILITY SERVICE

Today's Date _____

Full Name (As Shown on ID) _____ DOB _____

NEW SERVICE ADDRESS _____

Mailing Address _____ City _____ State _____ Zip _____

Home Phone # _____ Cell Phone # _____ E-Mail _____

SSN _____ Driver's License: State Issued/Number _____ / _____

Employer Name _____ Emp. Phone # _____

Requested Date of Service _____

Rent _____ Own _____ Landlord Name _____ Phone # _____

Electric Deposit Amount \$ _____ Water Deposit Amount \$ _____

The undersigned hereby makes application for Service at the above address and agrees to pay for said service as measured by the City's meter according to rate applications.

The applicant agrees to permit authorized agents of the City free access to the premises of the customer for the purpose of inspecting, reading or removing property of the City.

The City shall have the right, but shall not be obligated, to inspect any installation before electric service is introduced, or at anytime, and reserves the right to reject any wiring or appliance not in accordance with the City's standards; but such inspection or failure to inspect shall not be regarded as an insurance against defects in installation, wiring or appliance, or from violation of the City's rules and regulations or from accidents which may occur upon consumer's premises.

The applicant agrees that this application is subject to the City's Rules and Regulations, a copy of which is open for inspection at the office of the city, and that these Rules and Regulations are part of this agreement. In the case of default of payment, I promise to pay any legal interest due together with any collection agency costs and reasonable attorney fees incurred to effort collection on this account and any subsequent locations.

SIGNATURE _____ DATE _____

Co-Signer (if under 21 years old) _____ SSN _____

Address _____ Phone # _____