



COMMERCIAL APPLICATION FOR SERVICE

Today's Date: _____ Date Utilities are to be turned on: _____

Property Address: _____

Do you ☐ own or ☐ rent this property?

Mailing address (If different from the property listed above): _____

Which utility services are you applying for? (Please mark all that apply):

☐ Water (for new wt taps, please specify size _____) ☐ Sewer ☐ Gas ☐ Garbage

Business name: _____

EIN or Federal Tax ID Number: _____

Does this business currently have an existing deposit on file with us that needs to be transferred to this new location? ☐ Yes ☐ No

If yes, from what address? _____

Primary business proprietor's information:

Name: _____

Social Security Number: _____ / _____ / _____ Phone (cell): _____

Email: _____ Phone (other): _____

Have you ever had utility services with us before? ☐ Yes ☐ No

If so, where? _____

Secondary business proprietor's information:

Name: _____

Social Security Number: _____ / _____ / _____ Phone (cell): _____

Email: _____ Phone (other): _____

Have you ever had utility services with us before? ☐ Yes ☐ No

If so, where? _____



Additional persons authorized to manage this account on behalf of proprietor(s):

Name: _____ Title: _____
Email: _____ Phone: _____
Name: _____ Title: _____
Email: _____ Phone: _____

Additional persons authorized to request account information for billing purposes only:

Name: _____ Title: _____
Email: _____ Phone: _____
Name: _____ Title: _____
Email: _____ Phone: _____

THIS APPLICATION FOR SERVICE, WHEN EXECUTED, BECOMES A LEGAL BINDING CONTRACT FOR THE SERVICES PROVIDED BY THE RESPECTIVE UTILITY BOARDS AND CONSTITUTES AN AGREEMENT TO ABIDE BY THE RULES AND REGULATIONS GOVERNING THESE SERVICES INCLUDING TIMELY PAYMENTS AND RESONABLE AND DILIGENT PROTECTION OF UTILITY METERING AND OTHER EQUIPMENT AT THE SERVICE LOCATION. BILLING WILL BE AT CURRENT RATES FOR CLASS OF SERVICE AS ADJUSTED PERIODICALLY. I REPRESENT THAT NEITHER I NOR ANY OTHER INDIVIDUAL WHO RESIDES OR STAYS IN THE HOUSEHOLD OWES WSG A DELINQUENT BILL. ANY MISREPRESENTATION HEREIN SHALL BE GROUNDS FOR DISCONTINUANCE OF SERVICE. IF SERVICE IS TERMINATED FOR NON-PAYMENT, A RETURNED CHECK, OR OTHER CAUSE, ADDITIONAL CHARGES WILL BE ADDED. IF LEGAL ACTION IS NECESSARY, COLLECTION COSTS INCLUDING A REASONABLE ATTORNEY FEE WILL BE ADDED TO AMOUNTS DUE. NO RECONNECTIONS AFTER NORMAL BUSINESS HOURS. SERVICE CONNECTIONS MAY BE WITHHELD UNTIL SERVICE CHARGES AND DEPOSITS HAVE BEEN PAID. A COPY OF OUR RULES AND PROCEDURES GUIDELINES ARE AVAILABLE UPON REQUEST.

I AM OF LEGAL AGE AND AM AUTHORIZED TO EXECUTE THIS AGREEMENT. I UNDERSTAND THAT I WILL BE RESPONSIBLE FOR PAYMENT OF BILLINGS. I HAVE READ AND UNDERSTAND THE CONDITIONS OF THIS SERVICE APPLICATION.

SHOULD YOU HAVE ANY QUESTIONS ABOUT SANITATION (GARBAGE) PLEASE CALL 256-259-5548.

Primary Signature: _____ Date: _____

Secondary Signature: _____ Date: _____

Application for Scottsboro Water Sewer Gas Board services along with required documentation listed on WSG's *Renter Requirements for Service* or *Property Owner Requirements for Service* may be submitted via email to csr@scottsborrowsg.com. Deposits paid online will incur a convenience fee. For more information, please email customer service at csr@scottsborrowsg.com or call the office at **256-574-1515** or **256-574-1744**.