



**CITY OF WINNFELD
UTILITIES DEPARTMENT
WINNFELD, LOUISIANA**

DATE _____

NAME _____ **DATE OF BIRTH** _____

MAILING ADDRESS _____

SERVICE ADDRESS _____

HOUSE _____ **MOBILE HOME** _____ **APARTMENT** _____

OWN _____ **RENT** _____ **LANDLORD NAME** _____

HOME PHONE _____ **CELL PHONE** _____

SOCIAL SECURITY # _____ **DRIVER'S LICENSE #** _____

CONTACT PERSON/RELATIVE _____

ADDRESS _____ **PHONE** _____

TRANSFERS:

DATE TO DISCONNECT PREVIOUS ADDRESS _____

THE UNDERSIGNED HEREBY REQUESTS THE CITY OF WINNFELD UTILITIES DEPARTMENT (HEREAFTER CALLED THE COMPANY), TO RENDER SERVICE AT THE ABOVE SERVICE ADDRESS, AND AGREES TO RECEIVE FROM AND PAY THE COMPANY FOR ALL SUCH SERVICE REQUIRED ON THE PREMISES AT THE ABOVE ADDRESS AND AT SUBSEQUENT ADDRESSES DESIGNATED BY THE UNDERSIGNED TO WHICH UNDERSIGNED MAY REMOVE, IN ACCORDANCE WITH THE APPLICABLE RATES AND WITH THE SERVICE REGULATIONS OF THE COMPANY, WHICH ARE PART OF THIS APPLICATION, IN EFFECT AT THE TIME OF DELIVERY OF SERVICE FOR AS LONG AS THE UNDERSIGNED OCCUPIES OR CONTROLS (UNOCCUPIED) THE PREMISES AT THE ADDRESS/ADDRESSES ABOVE MENTIONED AND REQUIRES THE SERVICE SPECIFIED HEREIN.

THE UNDERSIGNED CERTIFIES THAT HE IS THE ACTUAL BONA FIDE RESIDENT OR FAMILY HEAD ACTUALLY RESIDING IN THE DWELLING UNIT AND IS NOT A DEBTOR OF THE CITY FOR UTILITY SERVICES PREVIOUSLY FURNISHED. FALSE STATEMENTS OR MISREPRESENTATION BY SAID APPLICANT SHALL CONSTITUTE VIOLATION HEREOF BY THE MAKER OF THE APPLICATION AND/OR USER OF THE SERVICES. WHOEVER VIOLATES THIS SECTION SHALL BE GUILTY OF A MISDEAMEANOR AND SERVICES SHALL BE TERMINATED.

SIGNATURE _____