



**CONTRACT FOR COMMERCIAL SERVICE**

BUSINESS NAME \_\_\_\_\_

BUSINESS ACCOUNTS MUST PROVIDE FEDERAL ID# \_\_\_\_\_

MAILING ADDRESS IF DIFFERENT FROM SERVICE ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP CODE: \_\_\_\_\_

**1 PHOTO ID AND 1 SIGNATURE ID REQUIRED WITH SOCIAL SECURITY NUMBER IF NO FED ID# PROVIDED**

Accepted Documents are: Federal, State, or Local Government issued ID containing photo, name, date of birth, gender, height, eye color, and address; Driver's License; Social Security Card; Passport, US Military Card; Native American Tribal Document; and Voter's Registration Card.

SOCIAL SECURITY NUMBER \_\_\_\_\_ (IF NO FEDERAL ID#)

TELEPHONE: DAYTIME \_\_\_\_\_ EMERGENCY NUMBER \_\_\_\_\_

NAME OF PERSON RESPONSIBLE FOR PAYMENT \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP CODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_

**PERSONAL REFERENCE:**

NAME \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP CODE \_\_\_\_\_

PERSONAL REFERENCE TELEPHONE NUMBER: \_\_\_\_\_

NAME OF LANDLORD/PROPERTY OWNER: \_\_\_\_\_

HAVE YOU EVER HAD SERVICE WITH THE MUNICIPAL UTILITY BOARD? \_\_\_\_\_ YES \_\_\_\_\_ NO

*THE UNDERSIGNED AGREES TO PAY THE ESTABLISHED RATES SET FORTH BY THE CITY OF PRYOR, OKLAHOMA ORDINANCES AND AGREES TO REGULATIONS GOVERNING SAID SERVICES. THIS APPLICATION BECOMES A CONTRACT UPON THE ESTABLISHMENT OF SERVICE. I CERTIFY TO THE BEST OF MY KNOWLEDGE THAT ALL UTILITY INSTALLATIONS MEET APPLICABLE BUILDING CODES OF THE CITY OF PRYOR.*

UTILITIES REQUESTED TO BE TURNED ON OR READ/LEFT ON GAS \_\_\_ WATER \_\_\_ ELECTRIC \_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_

CERTIFICATE NUMBER \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_ DATE \_\_\_\_\_