



**CONTRACT FOR RESIDENTIAL SERVICE
PROOF OF RESIDENCY AND
2 FORMS OF IDENTIFICATION IS REQUIRED**

NAME OF PERSON(S) _____ SOCIAL SECURITY# _____

_____ SOCIAL SECURITY# _____

SERVICE ADDRESS _____

MAILING ADDRESS IF DIFFERENT FROM SERVICE ADDRESS _____

CITY, STATE, ZIP CODE _____

1 PHOTO ID AND 1 SIGNATURE ID REQUIRED

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.

TELEPHONE: DAYTIME _____ CELL# _____

SOURCE OF INCOME: NAME _____

ADDRESS _____

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

*****SECURITY QUESTION AND ANSWER NEEDED TO CONDUCT ACCOUNT BUSINESS BY PHONE*****

QUESTION: _____

ANSWER: _____

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 _____