



## TOWN OF ROCKVILLE UTILITIES

### NEW CUSTOMER INFORMATION

Rockville Utility Customer No: \_\_\_\_\_ Meter Reading: E \_\_\_\_\_ W \_\_\_\_\_  
Utility Deposit Amount: E: **\$100.00** W: **\$50.00** S: **\$75.00** Cash/Check #: \_\_\_\_\_ Receipt #: \_\_\_\_\_  
Customer Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Driver's License/State ID #: \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Home Phone #: ( ) - \_\_\_\_\_ Cell Phone #: ( ) - \_\_\_\_\_  
Move in Date: \_\_\_\_\_ OWN or RENT: \_\_\_\_\_  
Name(s) of all adults living in household \_\_\_\_\_  
\_\_\_\_\_

### RENTALS ONLY

Homeowner (s) Name: \_\_\_\_\_  
Homeowner (s) Address: \_\_\_\_\_  
Homeowner (s) Phone #: \_\_\_\_\_

### ACKNOWLEDGEMENT

- 1) I hereby am requesting Utility Services at the above address from Rockville Utilities/Town of Rockville.
- 2) I agree to comply with the terms and conditions of Rockville's Electric, Water and Sewer Utility Service Ordinances governing water and sewer user charges and payments thereof.
- 3) I agree to pay ALL utility charges BY their due date; The 10<sup>th</sup> day of each month.
- 4) I agree to pay for all administrative, legal, and court fees that the Rockville Utilities/Town of Rockville should incur because I fail to pay the Utility charges by their due date.
- 5) I state that I, nor anyone else living at the above service address, owes Rockville Utilities/Town of Rockville any money from this or any other utility service address for Rockville Utilities/Town of Rockville.
- 6) I acknowledge that my Rockville Utility account and the information contained therein is considered a public record and may be given to other parties.
- 7) I state the utility service for the above service address is in my name.
- 8) I state the property ownership or property rental agreement for the service address is in my name.
- 9) I state the information I presented in this Service Agreement for Rockville Utilities/Town of Rockville is correct and accurate.
- 10) I acknowledge that making false statements under this application may subject my utility services to be terminated.

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### ROCKVILLE UTILITIES USE ONLY

#### Previous Customer Information

Customer #: \_\_\_\_\_

Service Address: \_\_\_\_\_

Previous Bill Owed (If Any): \_\_\_\_\_

Final Reading: \_\_\_\_\_ Date Read: \_\_\_\_\_ Move Date: \_\_\_\_\_

Verified By: \_\_\_\_\_ Date: \_\_\_\_\_