COLUMBIA CITY MUNICIPAL UTILITIES
APPLICATION FOR RESIDENTIAL UTILITY SERVICE
INFORMATION PROVIDED IS FOR OFFICE USE ONLY

FOR OFFICE USE ONLY: **ACCOUNT #**_____

DEPOSIT DATE _____ **CASH** _____ **CHECK** _____ **CREDIT CARD** _____ **OTHER** _____

ELECTRIC MD $_____ **RECEIPT #**_____ **WATER MD $**_____ **RECEIPT #**_____

Today's Date _____ **Service Start Date** _____

Service Address _____

Billing Address _____

Email Address _____

	APPLICANT # 1	**APPLICANT #2**
Name	_____ (Last / First / MI)	_____ (Last / First / MI)
Soc. Sec. #	_____	_____
Date of Birth	_____	_____
Phone Number	_____	_____
Previous Address	_____	_____
Employer	_____	_____
Employer's Address	_____	_____

Name of Relative Not at your Address_____

Relative's Address_____

References (Bank, Credit Union, Etc.)_____

Have you had service in Columbia City Before? _____ If Yes, Dates of Service _____

Are you: Buying _____ Renting _____ From Whom _____

Type of Heat _____ Type of Water Heater _____ Type of Cooking Stove _____

I (We) request service as described above and agree to pay all charges in connection therewith. I (We) also agree to pay CCMU's attorney fees in the event of non-payment, whether or not suit is filed. By signing this Application, the undersigned hereby irrevocably and unconditionally submits his/herself to the jurisdiction of the courts of Whitley County, Indiana in any action or proceeding arising out of/or relating to this application for residential utility service. I understand that if I am renting this property, the landlord may obtain account balance information at any time.

This Application is being signed in _____, IN.
City County

_____ _____
APPLICANT #1 SIGNATURE **APPLICANT #2 SIGNATURE**

The following individuals have my permission to obtain information regarding my account:

1. _____ 2. _____ 3. _____