



UTILITIES BOARD
City of Sylacauga
 301 N. Elm Ave.
 P. O. Box 207
 Sylacauga, AL 35150
 (256) 249-8501

For Sylacauga Utilites Board Use ONLY					
SUB Acct#(s)	1178150	Loc#	150033488	Serv Ord #	10507

APPLICATION FOR SERVICE

Applicant Name: _____	Date of Birth: _____
Social Security# : _____	Primary Phone : _____
Email Address: _____	Cell Phone: _____

Co-Applicant Name _____	Relationship: _____
Social Security #: _____	Date of Birth: _____
Email Address: _____	Primary Phone#: _____

Property Service Address _____ SYLACAUGA AL 35150-0000

Mailing Address _____ SYLACAUGA AL 35150-0000

Property Owner (if different from above information)	
Name _____	Phone _____
Address _____	

I, the applicant, hereby request to be supplied with utilites by the Utilities Board of the City of Sylacauga, I agree to pay for th services at the regular scheduled rates applicable from time to time as set by the Utilities Board of the City of Sylacauga, now or at any future time, and comply with the rules and regulations of the Utilites Board pertaining to the utility service.

I further agree that (1) The Utilites Board shall retain title to all meters and other property furnished by it; and (2) That I shall be responsible for the safekeeping of all properties of the Utilites Board on the premises where I receive service; and (3) That I shall guarantee free right of ingress and egress by the Utilites Board employees to meters, regulators and other properties of the Utilities Board located on said premises; and (4) That I will keep in good repair all appliances and piping on said premises (other than meters and regulators maintained by the Utilities Board) first notifying the Utilites Board prior to having repairs made, and will report immediately to the Utilities Board and defects discovered; and (5) That the Utilities Board shall not be liable for damages because of interruption of services or by reason of fires, accidents or any other cause due or alleged to be due to the installations of services and I agree to indemnify the Utilities Board against liability, loss or damage reason thereof, and I further agree to notify the Utilites Board one week prior to vacating said premises or discontinuance of services for any reason; and (6) That the Utilites Board shall not refund any payments made by the applicant or property owner for intallation from property line to meters; and (7) That the Utilities Board shall have the right to discontinue services without further notice in cass of the applicant's failure to comply with this agreement or any part thereof. I agree that any unpaid bills for utilities may be deducted from any of my advance payments.

Amount of Advance Payment \$0.00

Failure to return this application does not relieve you of the responsibility of paying your bill.

Applicant Signature: _____ Date: _____

Co- Applicant Signature: _____ Date: _____