Application For Utilities

Personal Information - Primary A	pplicant			
Name:First Middle		Date of Birth:		_ Gender: M F
	Last			
Social Security Number:	-	Drivers Licen	nse Number:	
Phone Number: ()		E-mail:		
Personal Information – Secondary	/ Applicant			
Name:		Date of Birth:		Gender: M F
First Middle	Last			_
Social Security Number:			Drivers License Number:	
Phone Number: ()		E-mail:		
Property Needing Utilities				
Address		Phone		
Property owner, landlord, or agent of landlord	Address	City	State Zip	Phone
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History				
Previous Address:City				
Previous Electric Provider:			State	Zip
Cor	npany	Address		Phone
Previous Water Provider:	npany	Address		Phone
Previous Gas Provider:				
	npany	Address		Phone
Have you ever been convicted of a felony? Y – I	If YES, type and date:			
Have you ever been evicted or filed upon? Y – N	If YES, when:			
Have you ever refused to pay rent when due? Y – N If YES, explain:				
Have you ever filed bankruptcy? Y – N If YES, when? discharged?				
References				
References				
Name	Address	Phone	Relationship	
			·	
Name	Address	Phone	Relationship	
Emergency Contacts				
Name	Address	Phone	Relationship	
Name	Address	Phone	Relationship	
F 1 177 '6' 1'				
Employment Verification				
Company Name	Addrocs		Phone	
Company Name	Address		Phone	
Supervisor Name:				
Signature				
By submitting this application, the applicant states that the above information is warranted to be true and hereby authorizes and specifically releases the City of Seymour to investigate any reference and/or employment history records, criminal history records, or statements of other data obtained from me or any other firm or person pertaining to				
my job, credit, criminal, rental, or financial responsibility. Applicant agrees that this application remains the property of the City of Seymour and shall release those supplying any information from all liability. The applicant further recognizes that a full disclosure of pertinent facts may be made to certain third parties if deemed necessary by the City of Seymour. By signing, you agree to allow the reporting of information to prospective landlords.				
Signature of applicant			Date	