Application For Utilities

Personal Information – Primary Applicant

Name: _____ Date of Birth: _____ Gender: M F
First Middle Last

Social Security Number: _____-_____-_____ Drivers License 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: _____ ☐ send bill electronically to this e-mail

Property Needing Utilities

_____
Address Phone

_____
Property owner, landlord, or agent of landlord Address City State Zip Phone

History

Previous Address: _____
City State Zip

Previous Electric Provider: _____
Company Address Phone

Previous Water Provider: _____
Company Address Phone

Previous Gas Provider: _____
Company Address Phone

Have you ever been convicted of a felony? Y – N 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

_____
Name Address Phone Relationship

_____
Name Address Phone Relationship

Emergency Contacts

_____
Name Address Phone Relationship

_____
Name Address Phone Relationship

Employment Verification

_____
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