

**PLEASE FILL OUT COMPLETELY AND RETURN TO CITY HALL**

Name on Acct. \_\_\_\_\_

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

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Last 4 of SSN \_\_\_\_\_

Acct No. \_\_\_\_\_

\*Meter ID \_\_\_\_\_

\*The office will fill this in