

APPLICATION FOR CITY OF DALLAS  
UTILITY SERVICE

129 East Memorial Dr.  
Dallas, GA 30132  
770-443-8110  
Fax: 770-443-8107

Name: \_\_\_\_\_ SS #: \_\_\_\_\_

Location of Service: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Business Phone #: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Marital Status: \_\_\_\_\_

Name of Spouse: \_\_\_\_\_ SS #: \_\_\_\_\_

TYPE OF SERVICE (For office use Only)			
Water	Yes	No	Amount of Deposit \$ _____
Sewer	Yes	No	Minimum Bill \$ _____
Garbage	Yes	No	

Day of week for Garbage P/U: \_\_\_\_\_ (Note: A private contractor will provide each residence/business with a 90 gallon cart that will have to be moved to the curbside on collection day unless exempted by city council!)

Our billing dates run from 15th to the 15th of each month. Bills are mailed approximately the 25th of each month. Bills are due by the 10th of the following month. A \$10.00 late fee is added to all bills not paid on or before the 20th of each month. **NO DELINQUENT NOTICE WILL BE SENT.** If your service is discontinued for non-payment there will be an additional \$15.00 cut on fee charge. Any customers turning service back on after it has been discontinued will pay a \$25.00 fine before service is restored. A charge of \$25.00 will be added to any returned check. If a check is returned more than two times, all future bills must be paid in cash or with money order.

Name of nearest relative not living with you: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

I HAVE READ AND UNDERSTAND THE ABOVE CONTRACT.

Customer Signature: \_\_\_\_\_

Date: \_\_\_\_\_