

**CITY OF COMMERCE
Application for Utility Service**

OFFICE USE ONLY		
Account # _____	Connect Date _____	A.M. - P.M.
Texas DL or ID # _____	Clerk _____	
Deposit Amount \$ _____	Application Fee \$ _____	

PLEASE PRINT:

Name/Company _____ SS/FID _____
Last First Middle

First name of spouse _____ DL # _____

Service Address _____ Home Phone _____

Landlord _____
Name Address Phone

Billing Address _____
City State Zip

Previous Address _____
City State Zip

No. in Household _____

Firm Name or Employer _____ How Long? _____
 Address _____
City State Zip

Business Phone _____ Position _____

Nearest Relative/Friend not living with you _____
 Address _____ Relationship _____

Customer Acknowledgement

I hereby agree to the following conditions:

1. To abide by all orders, rules and regulations adopted by the City of Commerce, governing the furnishings of water, sewer and garbage which are now in effect or hereafter which may be passed or adopted by the City.
2. To pay the application fees/charges and monthly service bill for water and sewer consumption and garbage collection.
3. It is my responsibility to know I should receive a monthly bill each month.
4. All bills are due twenty (20) days after billing date (10th, 20th or 30th); after due date a ten percent (10%) late charge will be assessed; ten (10) days later a \$30.00 processing fee will be assessed and services are subject to disconnection without further notice.
5. The deposit made by me is for the payment of any outstanding fees, charges or bill owed by me to the City at the termination of service.
6. To protect and save harmless the City from all claims for damages from bursting, leaking of any pipes used for water at the service location.
7. If I default in any of the above agreements, or if I do not pay during each month for utility services furnished to me or violate the orders, rules and regulations of the City, I will not hold the City liable for the disconnection of said service by the City upon the occurrence or any of the contingencies.
8. Where payment in full is not timely received by the City for services rendered, I agree to be responsible for all outstanding fees, additional past due charges, penalties, collection agency fees, attorneys fees, court cost, and any interest on such sums allowed by law.

I hereby certify that the information in this credit application is correct. I hereby authorize you or your agent to investigate the date furnished by me.

NAME	_____
LAST	_____
FIRST	_____
MIDDLE	_____
SERVICE ADDRESS	_____
DEPOSIT DATE	_____
DEPOSIT AMOUNT	_____

OFFICE USE ONLY

SIGNATURE OF APPLICANT

Date