

City of Odum
Application for Utility Services

Applicant's Name _____

SS Number _____ **Date of Birth** _____

Place of Employment _____

Address of Employer _____

Employer Phone # _____

"The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in the program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname."

_____ **White**, not of Hispanic origin _____ **Black**, not of Hispanic origin _____ **Other Ethnicity**

"This is an Equal Opportunity Program. Discrimination is prohibited by Federal law. Complaints of discrimination may be filed with the Secretary of Agriculture, Washington D.C. 20250"

Address Service Applied For _____

Residential _____ **Commercial** _____

Mailing Address _____

Phone # _____ **Email** _____

Name of Spouse _____

Address of Spouse (if different) _____

Spouse's SS # _____ **Spouse's Date of Birth** _____

Spouse's Place of Employment _____

Spouse's Employer's Address _____

Spouse's Employer's Phone # _____

(TURN OVER PLEASE)

Do you **OWN** this property? (Circle one) **YES** **NO**

Do you **RENT** this property? (Circle one) **YES** **NO**

If yes, what is your **Landlord's** Name and Phone # _____

Closest Relative **NOT** living with you:

Name _____

Address _____

Phone # _____

I understand that Water & Sewer bills are due by the 8th of each month and a 10% penalty will be added after this date. I also understand if my bill is not paid within 10 days after meters are read the second time, my service may be disconnected and that a \$25.00 fee must be paid before service can be reconnected.

Applicant Signature _____

FOR CITY USE ONLY – DO NOT FILL OUT

Date of Application _____

Meter Reading _____

Account # _____