

**CITY OF SULPHUR  
APPLICATION FOR COMMERCIAL UTILITY SERVICE**

BUSINESS NAME: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

BUSINESS MAILING ADDRESS (if different from above): \_\_\_\_\_

PREVIOUS ADDRESS: \_\_\_\_\_

**PLEASE CHECK ONE OF THE FOLLOWING**

- (1) Own Property (Proof of purchase required) \_\_\_\_\_  
Rent Property (\$50.00 refundable deposit required) \_\_\_\_\_  
(a) Name of landowner \_\_\_\_\_
- (2) Have you previously been a City of Sulphur utility customer? \_\_\_\_\_  
If yes, when? \_\_\_\_\_ Address of Service: \_\_\_\_\_  
Name assigned to account: \_\_\_\_\_

**PLEASE FILL IN THE BLANKS**

BUSINESS FEDERAL ID #: \_\_\_\_\_  
OWNER/MANAGER NAME: \_\_\_\_\_ HOME PHONE # \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
SS#: \_\_\_\_\_ DL#: \_\_\_\_\_  
DATE OF EMPLOYMENT: \_\_\_\_\_  
SPOUSE'S NAME: \_\_\_\_\_ SS#: \_\_\_\_\_ DL#: \_\_\_\_\_  
SPOUSE'S EMPLOYER: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
NAME OF NEAREST RELATIVE NOT LIVING WITH YOU: \_\_\_\_\_  
ADDRESS(relative): \_\_\_\_\_ PHONE: \_\_\_\_\_

\*\*\*\*Date Service Desired: \_\_\_\_\_ Time: \_\_\_\_\_ AM/PM

Is there a garbage receptacle at service address? Yes / No

\*\*\*\*\***SOMEONE MUST BE PRESENT WHEN SERVICE IS CONNECTED**\*\*\*\*\*

**THE UNDERSIGNED APPLICANT, AGREES TO BE RESPONSIBLE FOR ALL UTILITY PAYMENTS FOR SERVICES RENDERED BY THE CITY OF SULPHUR IN ACCORDANCE WITH THIS APPLICATION.**

\_\_\_\_\_  
**APPLICANT SIGNATURE**

**FOR OFFICE USE ONLY**

CLERK \_\_\_\_\_ DATE \_\_\_\_\_ DEPOSIT INFORMATION (if applicable) \_\_\_\_\_  
PROOF OF PURCHASE (if applicable) \_\_\_\_\_ SEWER ONLY \_\_\_\_\_