

**The City of Olive Branch Utility Office
Rental Application & Contract for Services**

Date Service Requested _____

Tenant Name _____

Place of Employment _____ Driver License # and/or S.S.# _____

Home Telephone # _____ Work Telephone # _____

Spouse _____

Other _____

Place of Employment _____ Driver License # and/or S.S. # _____

Home Telephone # _____ Work Telephone # _____

PLEASE CHECK ONE:

The undersigned and/or Spouse/Other has the authority to cancel, transfer, change information and request deposit refund on this service account and will be responsible for all bills. (Signature of spouse/other is required)

Only the undersigned has the authority to cancel, transfer, change information and request deposit refund on this service account and will assume total responsibility for all bills.

Property Service Address _____

Tenant Mailing Address _____

Please **CHECK** if your account is currently on bank draft; if transferring services with the City of Olive Branch.

The undersigned requests the City of Olive Branch (hereinafter called the City) to supply service at the above mentioned location, and agrees to receive and pay for such service rendered in accordance with the rates of the City in effect at the time of service. It is agreed that the City may require, as security for payment of bills, a cash deposit of such amounts as it may deem adequate. The undersigned applicant agrees to abide by and be subject to the rules and regulations of the City relating to service rendered pursuant to this contract. The undersigned agrees to pay all collection expenses, should this account be placed with the collection agency. If placed with an attorney-at-law for collection, or has to be sued on, the undersigned will pay a reasonable attorney's fee, plus court cost in addition to the principal and any interest, which shall be added to and become part of the judgement. The undersigned agrees to allow the City and/or its authorized agents' entrance onto above mentioned property to read meters, maintain and improve the system, and any other activity concerning the operation of the system. I acknowledge that I have read and understand the above.

Signature _____ Date _____ Signature Spouse/Other _____ Date _____

Home Owners Name _____

Home Owners Address _____

Home Owner Must Check One:

Lock all services off between each Tenant.

Put back into Homeowners name and leave services on Homeowner will assume total responsibility for all bills

Signature of Home Owner _____

Bank Draft Service Available Upon Request

(Office Use Only)

Residential Work Order # _____

Commercial Recpt # _____ Water Amt \$ _____ Meter # _____

Industrial Recpt.# _____ Gas Amt \$ _____ Meter # _____

Previous Account Number _____

Customer Account Number _____

Final Customer Work Order Number _____

Clerk Receiving Application _____

Customer Name _____