The City of Olive Branch Utility Office
Home Buyer Application & Contract for Services

Date Service Requested _____

Name _____
First M.I. Last

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

Home Telephone # _____ Work Telephone # _____

Spouse ☐ _____
Other ☐ First M.I Last

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. ☐

Service Address _____
Street City State Zip

Subdivision _____ Lot # _____

Mailing Address _____
Street City State Zip

☐ 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 judgment. The undersigned agrees to allow the City and/or it's 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

BANK DRAFT SERVICE IS AVAILABLE UPON REQUEST

(Office Use Only)

Work Order # _____

Recpt.# _____ Water Amount $ _____ Meter # _____

Recpt.# _____ Gas Amount $ _____ Meter # _____

Previous Account Number _____

Customer Account Number _____ Final Customer Work Order Number _____

Clerk Receiving Application _____ Customer Name _____