



161 Town Center Blvd.
 Jarrell, TX 76537
 Office: (512) 746-4593
 www.cityofjarrell.com

CITY UTILITY SERVICES AGREEMENT

(PLEASE PRINT CLEARLY and with blue or black ink)

SERVICE TYPE - RESIDENTIAL
Date Service to Begin: _____
Customer Name: _____
Secondary Auth Name: _____
Service Address: _____
Mailing Address (if different than service address): _____
Home/Cell Phone: _____
Email Address: _____
<input type="checkbox"/> OWN <input type="checkbox"/> RENT* (if renting, please complete info below)
Property Owner: _____
Cell Phone: _____
Email Address: _____

SERVICE TYPE - COMMERCIAL
Date Service to Begin: _____
Business Name: _____
Contact Name: _____
Service Address: _____
Mailing Address (if different than service address): _____
Home/Cell Phone: _____
Email Address: _____
<input type="checkbox"/> OWN <input type="checkbox"/> RENT* (if renting, please complete info below)
Property Owner: _____
Cell Phone: _____
Email Address: _____

Please read the following carefully. Applicant acknowledges that meters are the property of the City and that they may be turned on or off only as authorized by the City. It is unlawful for any person or property owner to reconnect or attempt to reconnect service and is punishable by fine up to \$1,000 and/or jail. Applicant acknowledges that the City has right of access to meters whenever necessary. Failure to provide such access may result in disconnection of service. Applicant agrees to abide by and consider as part of this agreement any ordinance, rules, and regulations the City adopts concerning utility service. All new customers shall be required to pay a security deposit in the amount of \$125.00 for service to be established. All bills are due on or before the 15th day of each month, at which time a late fee shall be assessed for all unpaid balances. In the event service is disconnected due to nonpayment, the City shall require full payment of any delinquency, in addition to any reconnection fees prior to reinstatement and reconnection of utility services. Applicant agrees to accept full responsibility for the payment of all charges incurred until such time that they notify the City in writing of their intent to cancel service. By signing below, I hereby certify that the above information is correct to the best of my knowledge and do agree to abide by all terms as required by the City of Jarrell.

 Applicant Signature

I request that any personal and/or identifying information contained within my utility account be kept confidential unless disclosure is required or mandated by law.

DO NOT WRITE BELOW THIS LINE – FOR OFFICIAL USE ONLY

Processed by (initials): _____ New Acct #: _____ Acct Type: SW SW/WTR

Deposit Paid: ONCOR Confirmation #: _____ Meter Type: MM Sen Begin read: _____