



Covington Public Works/ Utilities

RESIDENTIAL UTILITY APPLICATION

**BEFORE ANY UTILITIES ARE TURNED ON ANY OLD BILLS MUST BE PAID IN FULL**

Today's Date: \_\_\_\_\_ Utility on Date: \_\_\_\_\_ Account #: \_\_\_\_\_

Full Legal Name: \_\_\_\_\_

Address you want utilities on: \_\_\_\_\_

Address to send bill: \_\_\_\_\_

Transferring from What Address: \_\_\_\_\_

Account #: \_\_\_\_\_ Utility turn off date: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

DL#: \_\_\_\_\_ Other ID#: \_\_\_\_\_

Phone#: \_\_\_\_\_ Work#: \_\_\_\_\_

Is there a mailbox at this address? Yes ( ) No ( ) I don't know ( )

Is there a garbage can at this address? Yes ( ) No ( ) I don't know ( )

Would you like to participate in the Round Up Program? Yes ( ) No ( )

DEPOSITS                      GAS    \$ \_\_\_\_\_ .00      OLD BILL AMOUNT

                                    WATER    \$ \_\_\_\_\_ .00      \$ \_\_\_\_\_

                                    SEWER    \$ \_\_\_\_\_ .00

                                    SANITATION    \$ \_\_\_\_\_ .00

Non-Refundable Service Charge    \$ \_\_\_\_\_ 25.00

TOTAL \$ \_\_\_\_\_ .00

SIGNATURE: \_\_\_\_\_

SIGNATURE OF CO-APPLICANT: \_\_\_\_\_

**BY SIGNING THE FRONT OF THIS APPLICATION, YOU ARE AGREEING TO THE TERMS AND CONDITIONS ON THE BACK OF THIS APPLICATION.**