



LaFollette Utilities Application for Services (Residential)

for LUB use only

Acct#	Deposit #	Representative:
CBI OK DLNQ	Deposit Amount	Location No.:

Applicant(s) Information

Applicant Name	DL#	SSN#
Co-Applicant/Spouse	DL#	SSN#
Marital Status: Single Married	Home Phone Number:	
Separated Widowed Divorced	Cell Number:	
Work Number:	Email:	

Previous Address

Street	City, State, Zip
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Service Address:

Street
City
State, Zip

Mailing Address (if different)

Street
City
State, Zip

Employer(s)

Applicant	Phone
Co-Applicant/Spouse	Phone

List two nearest relatives or friends not living with you

1. Name	Phone
2. Name	Phone

CITY OF LAFOLLETTE BOARD OF PUBLIC UTILITIES

Application and Contract for Service

The undersigned requests the City of LaFollette Board of Public Utilities (hereinafter called LUB) to supply service, which shall include service at any location. Applicant agrees to receive and pay for all such services rendered or reserved for use of the undersigned when bills are rendered therefore in accordance with the rules of LUB in effect at the time the service is rendered. It is agreed that LUB may require, as security for the payment of bills, a cash deposit of such amount as it may deem adequate. The undersigned agrees to abide by and be subject to the rules and regulations of LUB relating to the service rendered pursuant to this contract. The undersigned agrees to grant a release of information to LUB for credit history, verification of service contract information, and any necessary collection action. The undersigned agrees to pay any and all collection fees, court costs, and reasonable attorney's fees incurred by LUB to perfect collection of a delinquent account.

Signature of Applicant

Date

Signature of Co-Applicant

Date

What is Caring Neighbors? *Caring Neighbors is a program sponsored by LaFollette Utilities to help customers who are less fortunate pay their bills. Funds for the program come from voluntary contributions made by customers each month or as a one-time donation. It is an emergency assistance fund. It is not intended to be an ongoing source of extra income, but a temporary help to be used for paying bills.*

I want to contribute \$1__\$5__ Other__ each month to Caring Neighbors Yes__ No__

LaFollette Utilities (LUB) prohibits discrimination on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation and marital or family status.

December 2014