City of Madison
132 N. Main Street
P.O. Box 32
Madison, Georgia 30650
(706) 342-1251

UTILITY SERVICE - MOVE IN APPLICATION

CONFIDENTIALITY NOTICE

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RESIDENTIAL - Applicant Information

Applicant's Full Name _____ Service Date _____

Birthdate _____ Spouse's Name _____

Service Address _____

_____

Mailing Address (if different from service address) _____

_____

Telephone: _____ Cell _____

Employer _____ Telephone _____

Personal Contact _____ Telephone _____

Office Use Only: **I.D. Checked** _____

Account # : _____

S.O. # _____

Location:
☐ Business **OR** ☐ Residential

Do you?
☐ Own **OR** ☐ Lease (Checked _____)

☐ Move - In **OR** ☐ Transfer

Previous Address: _____

Agreement (s)

I do hereby make application for utility service(s) to be installed at the street address above subject to the terms and conditions of all the City of Madison's ordinances covering same, and authorize the City of Madison, and its agents and employees, to investigate any information herein listed or statements obtained from me or from any other person pertaining to my credit and financial responsibility. I understand that accounts are the be settled in full each month unless other arrangements are made.

Sign & Date _____

FOR GAS CUSTOMERS ONLY

I hereby acknowledge receipt and understanding of the Underground Pipe Maintenance Letter.

Sign & Date _____

Fill out the form above by tabbing through the entry fields. Then click the print button. Sign the printed form and then either mail or bring it to City Hall at the address above. Deposit(s) are due with this application. If delivering in person, please bring cash, check, or credit card. If mailing, please call the number above for the deposit amount and include a check with the application.

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