

Wadsworth Ohio Utility Application/Agreement



Deposit: \$ _____
Paid By: _____
Account #: _____
FOR OFFICE USE ONLY

Service Start date: ___/___/___

120 Maple St. Wadsworth, OH 44281

Applicant **OR** Business Name: _____ Driver Lic. # _____

SS # **AND/OR** EIN (Business Only): _____ Birth Date: ___/___/___

Applicant's Phone or Cell #: _____ Applicant's Employer _____

Co-Applicant Name: _____ Co-Applicant Driver's License #: _____

Co-Applicant SS#: _____ Co-Applicant Phone/Cell: _____ Co-Applicant DOB: _____

Service Address: _____

Billing Address: [can be same as above]

Previous Address: _____ Service End Date (if a current Wadsworth customer): ___/___/___

- Type of Premises: Residential or Commercial
Premises are: Owned or Rented
Premises are: Inside Corp. Limits or Outside Corporate Limits

If Premises rented: Copy of Lease (**ALL Tenants MUST Sign**)

Security Deposit: Residential: \$50 - \$300.00 Cable/Internet only \$50.00
Commercial: 2 mos. Average bill but not less than \$300

- Type of Utility Service: Electricity Water Sewer Sanitation/Trash Service
 Storm Water Cable/Internet

I, the undersigned, hereby agree to be responsible and liable for all charges, fees and expenses incurred to provide the above identified Utility Service to the above described Premises/Business until such time as such Utility Service is terminated, including all applicable late fees or reconnection charges. If Applicant is a Tenant, Applicant understands and agrees that Property Owner may be provided information regarding status of this account at any time upon request and that Property Owner will be notified of Disconnection Notices.

In the event that Applicant vacates the premises leaving a balance, Applicant understands that they are personally liable and said balance may be sent to a third party outside agency for collection. Applicant also understands that all information associated with the account, including phone numbers and any personal information, will be available to the third party vendor. By signing below you agree that a third party may contact you in any manner suitable, including automatic dialing device (with or without a prerecorded message), by phone (wireless or landline), text message, email etc. for any balances outstanding on the account.

Applicant's Name [Print] _____ Applicant's Signature: _____

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Received by: _____ Date: ___/___/___
Approved for Service: _____ Date: ___/___/___ Work Order #: _____