

TRANFER SERVICE APPLICATION NATURAL GAS

APPLICANT NAME				
ransfer from:				
Account #	Address	:		
*If service is ti	ansferred within the first	t year, there is or	nly a \$25 Transfer of Service Fee.	
SERVICE IS:	PROPERTY IS:		LOCATED:	
Residential:	Owned:	(\$75)*	Inside City Limits:	
Commercial:	Rented:	(\$100)*	Outside City Limits:	
*This	is a New Service Connect	tion Fee ONLY, no	ot a refundable deposit.	
	are required to show a Gov or a copy of Lease if Renting		-	
NEW SERVICE ADDRESS		CITY / STATE		
MAILING ADDRESS		CITY / STATE		
PHONE NUMBER (HOME)		PHONE NUMBER (CELL)		
PLACE OF EMPLOYMENT		WORK I	WORK PHONE	
	3FR	DESIREI	D SERVICE START DATE	
SOCIAL SECURITY NUME				

I hereby apply for the Service Utility of Natural Gas as indicated above at the address shown. I did receive a copy of the "Rules and Regulations" along with a "Title IV Program". I do agree to abide by the "Rules and Regulations" of the governing service.

SIGNATURE OF APPLICANT

DATE

Print Form

Download Form Email to: PikevilleUtility@Bledsoe.net