

## **APPLICATION FOR RESIDENTIAL SERVICE**

City of Ferris 104 S Central Ferris, Tx 75125 Phone: (972) 842-2752 Fax: (972) 842-2609 www.cityofferris.org

A Texas Main Street City tha	A Texas Main Street City that Bricked the World Date:			Service Start Date:		
Name:						
	Last		First	М		
Phone:				2.11.21		
E-mail:	Home Phone	Busir	ness Phone	Cell Phone		
Service Address:						
service / tauress.	Street	 t	City/State	Zip Code		
Mailing Address:			2.04, 2.00.00	- р - г - г		
Street		t	City/State	e Zip Code		
ID information:						
<b>5</b>	Driver's License	e Number	State	Social Security Number		
Emergency Contact			Address	Phone Number		
Name Employment:		!	Address	Phone Number		
	Name	<u> </u>	Address	Phone Number		
Do you own the pro If not, Owner:	perty where service w	vill be setup?	Yes	No		
	Name	1	Address	Phone Number		
If applicant will not	be occupying serviced	premises, list the	e name of occupan	ts:		
	had service in the Cit	y of Ferris?	Yes	No		
If yes, what name/a	ddress?			When?		
ORDINANCES, RULES, AND LOCAL LAWS, CODES, RULE AND ORDINANCES AND FUI FERRIS TO DISCONTINUE O	REGULATIONS, INCLUDING BU S, AND REGULATIONS. THE UN RTHER UNDERSTANDS THE TER	T NOT LIMITED TO CITY IDERSIGNED APPLICANT RMS AND PROVISIONS T WITHOUT NOTICE TO A	ORDINANCES AND ALL O FACKOWLEDGES THAT TH THEREOF, INCLUDING BUT IPPLICANT AND/OR THE P	COVISIONS OF ALL APPLICABLE CITY ITHER APPLICABLE FEDERAL, STATE, AND HE OPPORTUNITY WAS AFFORDED TO REVIEW T NOT LIMITED TO THE RIGHT OF THE CITY OF PROPERTY TO WHICH SERVICE IS OR MAY BE		
Applicant Signature	e:					
	**COPY OF DRIN	/ER'S LICENSE OF	PICTURE ID REQU	JIRED FOR ALL NEW SERVICE **		
Payı	ment Options:	Automatic B	ank Draft	Bill me by mail		
		FOR OFFICE U	SE ONLY			
DEPOSIT	AMOUNT \$	+ APPLICATIO	N FEE \$	=TOTAL \$		
PAYMEN	T METHOD CASH	CHECK #	CREDIT CA	ARD		
ACCOUN	T NUMBER	PROCESSED B	Υ	DATE		
METER #	ID#	D/	ATE WORK ORDER	SUBMITTED		