



# CITY OF RADFORD

## APPLICATION FOR UTILITY SERVICES

### Applicant Information

Applicant name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Driver's License#: \_\_\_\_\_ Email: \_\_\_\_\_  
 To receive bill via email please check box

**New Service Information:**

Location of New Service: \_\_\_\_\_  
 Requested Cut on Date: \_\_\_\_\_ Office Use: Customer ID number: \_\_\_\_\_  
 New Account number: \_\_\_\_\_

**Current Radford Customers Only:**

Location of Current Service: \_\_\_\_\_  
 Current Account Number (if known): \_\_\_\_\_ Requested Cut off Date: \_\_\_\_\_

**Business Customers Only:**

Name of Business (if applicable): \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_  
 Federal ID#: \_\_\_\_\_ Legal Entity:  Individual  Sole Prop  Partnership  Corporation/LLC  
 Email: \_\_\_\_\_  
 To receive bill via email please check box

**Additional contact information:**

Mailing address (if different from new service location)  Permanent or Guarantor address  
 Street: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 If you are interested in having your payments automatically debited from your bank account each month please inform the customer service representative. There is a separate form that will need to be completed to obtain this service.

### Guarantor Information

Guarantor name: \_\_\_\_\_  
 Guarantor Signature: \_\_\_\_\_  
 Driver's License#: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

### Deposit Information

**Deposit required:**

- |   |   |
|---|---|
| <input type="checkbox"/> \$200.00 Residential electric service      | <input type="checkbox"/> \$50.00 Residential water/sewer service      |
| <input type="checkbox"/> \$500.00 Small general electric service    | <input type="checkbox"/> \$75.00 Small commercial water/wastewater    |
| <input type="checkbox"/> \$2,000.00 Medium general electric service | <input type="checkbox"/> \$200.00 Medium commercial water/wastewater  |
| <input type="checkbox"/> \$5,000.00 Large general electric service  | <input type="checkbox"/> \$2,000.00 Large commercial water/wastewater |
- Deposit Waived:**  Letter of Credit  Satisfactory Payment History with City of Radford

### Notary Use Only

State of \_\_\_\_\_ City/County of \_\_\_\_\_  
 On \_\_\_\_\_  
 The individual whose name is signed to the foregoing instrument appeared before me; acknowledged the foregoing signature to be his/hers, and having been duly sworn by me, made an oath that the statements in the said instrument are true.  
 My commission expires: \_\_\_\_\_ Signature \_\_\_\_\_

I (applicant or guarantor) hereby request the City of Radford to provide utility services at the above service address. I (applicant or guarantor) agree to pay all charges for services rendered as a result of this request. I (applicant or guarantor) understand and agree that failure to pay any amount due to the City can result in termination of services and legal action for the collection of such sums plus interest, court costs, and legal expenses and fees.

PRINTED NAME: \_\_\_\_\_  
 SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Return this completed form to: City of Radford Billing and Services, 619 Second St Room 156, Radford VA 24141**  
**(540) 731-3602 (540) 731-3689 Fax**