

To be completed by City of Monroe staff only:

Deposit Amount \$_____ + Bad Debt (if any) \$_____

Processed By: _____ Date: ____ History Verified □ ID Verified □ Account #: __

Utility Operations Division
Customer Service
316 Breard Street
Monroe, LA 71201
Ph (318) 329-2220 Fax (318) 329-3358
e-mail: customer.service@ci.monroe.la.us
website: www.monroela.us

APPLICATION FOR SERVICE

Prior to establishing s **PLEASE PRINT**	service, a deposit is required. A \$2	5.00 Activation Fe	ee will be applied to th	e first bill.
*Indicates Required Field.				
*Date to Begin Service	ce *Service Locati	on Desired		
*LEGAL NAME (FIRS	ST, MI, LAST) (If Commercial see *	COMMERCIAL* I	pelow)	
*SOCIAL SECURITY	or TAX ID # (Required for Identity	 verificat ion) * D	river's License #/ Stat	e Issued
*Primary Phone #	Secondary Ph	none #	Fax Number	
Email address:				
Check to rece	eive bills and notifications by email	only		
*BILLING ADDRESS	S: Same as Service Location	Diffe	erent from Service Lo	cation (see below):
IN CARE OF				
STREET / P.	O. BOX			
*COMMERCIAL AC Name of Person Person Completi	Completing Applicationing Application Title			
*TypeofAccount:	Residential: Number of Commercial: Type of Busine			ers (\$23.00 ea):
	☐Trash only			
	☐Fire Hydrant only			
	☐Master Deposit (own 6 or mo	ore rental properti	es)	
*Do you own the prop	perty where service will be setup?	□Yes □No		
Owner of Property:		Pho	ne :	
to go inside the reside be left on if meter is activate the service. The until arrears plus any acknowledges that m	o be turned on, all faucets, washer ence / building. You must make sur running, and it may cost you an a The applicant agrees if there is a fai additional charges are paid or an eneters are the property of the Cit uthorized connection of a meter is i	re all water conne additional fee if wo ilure to pay when o rrangement is ma y of Monroe and	ections are off at the sections are off at the section with the section of the section at the section of the section at the section of the se	ervice address. Water will no an one trip to the property to tions may discontinue service ersonnel. The applicant also or off only by authorized city
provided on this form to furnish me utility se	rvice in accordance with the terms is, to my knowledge, true and correctivities. If any of this information is by Operations, my utility service ma	ect. I understand determined to be	that the City of Monroe false or incorrect for	e is relying on this information the purpose of misleading o
	ANT: If there is a dispute concerni presentative in Utility Operations D			
Signature of Applicant/	/Authorized Person:			

_ = Total when verified