

For office use only:

Customer No. _____ Connect Date _____ Final Bill Date _____

City of Cascade Locks Application for Utility Service

Service Address _____

Renter

Landlord

Name _____

Address _____

Phone _____

Primary Applicant

Name _____

Date of Birth _____

Mailing Address _____

Phone _____

Email _____

Social Sec. No. _____

State ID No. _____

Employer

Name _____

Address _____

Phone _____

Primary Bank

Name _____

Address _____

Phone _____

Previous Address _____

Emergency Contact

Name _____

Address _____

Phone _____

Secondary Applicant

Name _____

Date of Birth _____

Mailing Address _____

Phone _____

Email _____

Social Sec. No. _____

State ID No. _____

Employer

Name _____

Address _____

Phone _____

Secondary Bank

Name _____

Address _____

Phone _____

Previous Address _____

Emergency Contact

Name _____

Address _____

Phone _____

