

992 5th Street P. O. Box 510 Jellico, TN 37762 Phone (423) 784-8431 Fax (423) 784-3742

Application for utility service (Individual):

Please complete the following application to establish service.

Your social security number is required by Jellico Utilities (JU) in order to activate your account and commence service, and the SSN may be used by the Utility for collection purposes if your account becomes delinquent. Under the Tennessee Public Records Act, social security numbers are designated as confidential, and as such the Utility cannot release your number to any person or entity.

The undersigned requests Jellico Utilities (JU) to supply service (which shall include any and all utility services provided now or in the future by JU at any location as the undersigned hereby requests or may hereafter request or receive from JU), and agrees to receive and pay for all service rendered or reserved for use of the undersigned when bills are rendered therefore in accordance with the rates, rules and regulations of JU in effect at the time the service is rendered. The undersigned acknowledges that from time to time the rates, rules and regulations of JU may be altered, amended or repealed by JU in its sole discretion and no such alteration, amendment or repeal shall affect the undersigned's obligations hereunder. It is agreed that JU may require, as security for payment of bills, a cash deposit of such amounts as it may deem adequate. The undersigned agrees to abide by and be subject to the rules and regulations of JU relating to all service rendered pursuant to this contract. The undersigned agrees to be responsible for any and all collection fees associated with the collection of delinquent bills, which may amount to 35% of the total amount of delinquent bills, in addition to reasonable attorney fees and court costs. The undersigned acknowledges that the undersigned has read and understands the above and is in agreement with each of the terms of this contract.

FOR OFFICE USE ONLY
Location ID
Customer ID
Rules and Regulations Paper Copy □ Received □ Declined □ Online
Utility Rates Paper Copy Received Declined Online
DEPOSIT \$
□ On File
Transfer fromLocation Number
CSR

PLEASE COMPLETE INFORMATION BELOW THIS LINE ONLY

Requested Start Date		
The applicant certifies that the utility s purposes and/or property for rental en	vervices being applied for \square are \square are not for l agagements.	pusiness
(Please Print) Applicant Name		Are You the Property Owner?
First	Middle Last	□Yes □No
Service Address		
Street / Apt. # City		If No, Who is the Property Owner /Manager?
Services Requested: ☐Electric ☐	□Water □Sewer □Outdoor Security Light	
	Mobile Home Temporary Garage Other (40) (40)	Property Owner's Phone #
Billing Address (if different from service add	dress)	• •
Email		
Social Security #	Driver's License #	Email Notification □Yes □No
Spouse's Name	Spouse's SS#	Text Notification
Home Phone #	Mobile Phone #	Mobile Carrier
Applicant Signature	Date	