

City of Munford Utilities
1397 Munford Avenue
Munford, TN 38058

Utility Service Application



Munford Utility Acct# _____

Customer Information

Primary Name on Acct: _____
(Print Please)

Primary - Social Security # _____

Secondary Name on Acct: _____
(Print Please)

Secondary - Social Security # _____

Gender: Male _____ Female _____

Decline to answer _____

Race (circle one) Caucasian African American Hispanic
Indian Other Decline to answer

Property Address: _____

Mailing Address if different: _____

Street # Street Name Apt#

City State Zip

Phone # Day# _____ Night# _____

Email Address: _____

Do you Own _____ or lease/rent _____ this property.

Date Requesting Service to begin: _____

Please complete both sides of application

Would you like to enroll in *E-BILLING? Yes _____ No _____

*(if enrolled in E-Billing, no paper copy will be mailed)

*Trash Receptacles needed One _____ Two _____

*(If property inside Munford City Limits)

Is there already a receptacle on site? Yes _____ No _____

Emergency Contact _____ Relationship _____

Emergency Contact Phone # _____

By signing below, I agree the City of Munford may use this information to complete my account activation. I understand that it is my responsibility to provide the City with current contact information and agree that this information is current and correct to the best of my knowledge. Payment is due no later than the 10th of each month to avoid penalty. After the 20th of each month additional penalties will accrue and my services maybe disconnected without further notice. I also understand I can be held responsible for giving false information to the fullest extent of the law.

Primary _____ Signature: _____

Date _____

Secondary _____ Signature: _____

Date _____

Below to be completed by Customer Service Representative

Did customer provide proof of residency: lease _____ mortgage documents _____

or other (please describe) _____

Date Service is to begin: _____

Customer Service Representative Signature _____