PRINCETON PUBLIC UTILITIES COMMISSION

907 1st Street, Princeton MN 55371 Phone: (763) 389-2252 Fax: (763) 389-2273

APPLICATION FOR UTILITY SERVICE

(Please Print)

Application Date	//Da	te Service Required	/_	/	
Service Address Account #					
Customer Full Name			DOB	/	_/
Customer Full Name			DOB_	/	/
SS # / Fed ID#		/			
Photo Id D/L No		/			
Phone #	Cell Phone #	i	Email:		
Phone #	Cell Phone #	[Email:		
Billing Address (If differen	nt from above):				
Previous Address					
Customer Is: Owner	Residential	Commercial			
CUSTOMER: THIS IS A C I hereby request Princetor service address, and I agr	Public Utilities Commis	ssion (PPUC) to furnis	h utility se		the above
I understand that a deposite PPUC may refund this deposit. See PUC Services	posit after 24 consecution stomer prior to this per positive Letter of Credi	ve months of payment lod, and my bill is paid	s received I in full, an	on or l y rema	pefore due ining deposit
I understand that utility pa each month's unpaid bala		the due date, or a pe	nalty of 10)% will	oe added to
Failure to make monthly p disconnected, the total amnew or additional deposit	nount due plus a reconn				
I also understand that by s Practices Act, allowing PF					
Applicants Signature	Date	Applicants Signature			Date
PPUC Representative					