VILLAGE OF ANGELICA ELECTRIC AND WATER

PO Box 158, Angelica NY 14709 - 585-466-7431 - fax 585-466-3103 - vangelica@stny.rr.com

Written Application for Residential and Commercial Service

Please Circle:	Residential	Commerc	ial		
Date of Application: Effective Date of Service:					
Service Address:		NY			
	Street			State	Zip
Mailing Address: (if different then servic					
		Street or PO Box	City/Town	State	Zip
Driver's License#:		So	Social Security #:		
Email Address:					
			l will be sent by email each r		
Please Check:	Own Rent	Lease (Num	ber of Months)	
Landlord Name:		Lar	ndlord Telephone:()	
Please indicate if ar	ny of the following appl	y to you:			
Life Support Appara	tus Yes	No Pu	blic Assistance Recipi	ent: Yes	No
SSI Recipient:			sabled: Yes		
Employer:		Ad	dress:		
Emergency Contact		Те	lephone: : ()		

I, ______ request electrical and or water service at the above location. I fully understand that the electrical service being supplied by the Village of Angelica, under its rules, regulations and general schedules of the Dept. of Public Service. Bills are payable net, the last day of each month. Interest added at 1.5% (2% Water) per month after that. I understand that service may be terminated on any account sixty (60) days past due.

Tenant agrees that the village can release electric and water billing information to Landlord in the event that Landlord issues a Notice to Terminate Tenancy file a Petition to Evict or if tenant is more than sixty (60) days delinquent in paying these obligations.

Customer Signature: _____ Date: _____

The Village of Angelica will require a security deposit for payment of an account for electricity and related services provided by the Village of Angelica for short-term or seasonal customers only.

The Village of Angelica may require the applicant to provide a copy of a lease (if one exists), deed, bill of sale or other documentation to show the date the applicant became responsible for service.