

PHILADELPHIA UTILITIES

NEW SERVICE INFORMATION

We will also need a photo ID, Social Security Card, and Deed or Rental/Lease agreement

******* CASH OR CHECK ONLY!! NO CARDS *******

Please fill this form out completely.

NAME _____

NEW ADDRESS _____

BILLING/MAILING ADDRESS (if Different) _____

TURN ON DATE _____ TIME _____ **Someone has to meet the service man**

PHONE NUMBER _____

EMPLOYER _____ EMP. PHONE # _____

CONTACT PERSON (Ok for Bill Info) _____ PHONE # _____

DATE OF BIRTH _____

SOCIAL SECURITY NUMBER _____

E-MAIL ADDRESS _____

EMERGENCY CONTACT PERSON _____ PHONE # _____

(This person would be contacted for Example: (if bad water leak or in case of house fire)

_____ OWN (OR) _____ RENT *(If rental, please list landlord and phone number)*

LANDLORD NAME _____ PHONE # _____

CUSTOMER SIGNATURE _____ DATE _____