



CITY OF RADFORD
APPLICATION FOR UTILITY SERVICES

OFFICE USE ONLY: _____

CUSTOMER ID NUMBER: _____
 OLD ACCOUNT NUMBER: _____
 NEW ACCOUNT NUMBER: _____
 DEPOSIT AMOUNT: _____ DEPOSIT WAIVED: _____
 LETTER TO COME: _____ SATISFACTORY PAYMENT HISTORY: _____

APPLICANT INFORMATION

Applicant/Business Name: _____ Telephone: _____
 Driver's License # _____ Email: _____
 Social Security Number: ** _____ Federal ID# (Business Only): _____

***The Federal Privacy Act of 1974, requires that you be informed that all social security numbers provided herewith will be used for the sole purpose of complying with the Virginia Set-Off Debt Collection Act, Code of Virginia § 58.1-520 et seq., as provided for in the Virginia Government Data Collection and Dissemination Act, Code of Virginia § 2.2-3800 et seq. The disclosure of your social security number is voluntary. No applicant for utility services will be denied the provision of utilities due to refusal to disclose his/her social security number. To confirm the identity of the applicant other forms of government identification will be required. Acceptable forms of government identification include: A valid state issued driver's license or valid state issued identification card, passport, or TIN-number (number issued by the IRS for tax purposes) and/or permanent residence card.*

New Service Location Information

New Account Transfer Account Additional Account

Address of Property **Moving Into**: _____
 Requested **Cut-On Date**: _____
Mailing Address if different from Service Address:
 Street/PO Box: _____
 City: _____ State: _____ Zip: _____

Previous Service Information If Transferring

Address of Service to **Discontinue**: _____
 Requested **Cutoff Date**: _____

Guarantor Information (if required)

Guarantor Name: _____ Telephone: _____
 Guarantor Address: _____
 Driver's License # or SSN: ** _____ Email: _____

Instructions

New customers or existing customers must provide a picture ID (some examples are Driver's License, Passport, State or Military ID) in addition to this completed application. If mailing, faxing or emailing a photo copy of your ID is acceptable. Also include your good standing letter of credit from a previous utility company to waive the deposit or a deposit. If you need to pay your deposit online go to www.radfordva.gov and select online payments then utility deposit. You will need your Customer ID, account number and deposit amount which we will email to you once you have completed the application process. **All signatures must be original, no computer generated signatures will be accepted.**

Residential Electric Deposit \$200.00 Small Commercial Electric Deposit \$500.00 Medium Commercial Electric Deposit \$2,000.00
 Residential Water Deposit \$50.00 Small Commercial Water Deposit \$75.00 Medium Commercial Water Deposit \$200.00

SIGNATURES

I (applicant or guarantor) hereby request the City of Radford to provide utility services at the above service address. I (applicant or guarantor) agree to pay all charges for services rendered as a result of this request. I (applicant or guarantor) understand and agree that failure to pay any amount due to the City can result in termination of services and legal action for the collection of such sums plus interest, court costs, and legal expenses and fees.

Applicant Printed Name: _____ Guarantor Printed Name: _____
 Applicant Signature: _____ Guarantor Signature: _____
 Date: _____ Date: _____