CITY OF ST. JOHN

APPLICATION FOR ELECTRIC & WATER SERVICE CONNECTION

	Date:
Name:	
Service Address:	
Mailing Address:	
Previous Address:	
Date of Birth:	Social Security Number:
Driver's License Number:	Phone #:
Employer:	
Spouse's Name:	
	Social Security Number:
Driver's License Number:	Phone #:
Employer:	
Meter Connection Fee:	
\$125.00. You have to have the would be due the next month w OR: Letter of Credit from a ut.	non-refundable. You may split this fee into two payments of first \$125.00 the day service is connected, then the other half ith your utility bill. Ity provider with a minimum of 12 months utility history at present connection of service and should have paid the final bill.
Photo ID is required to process your a	pplication
Any unpaid amount will be sent to coll	ection company after 30 days of the termination date.
Signature of Applicant:	Date:
***********	**********************
Office Use Only	
Account Number:	
Connection fee: Full Half	Letter of Credit Date received: