



Kenyon Municipal Utilities
709 2nd Street - Kenyon, MN 55946
 Phone: 507-789-6415 Fax: 507-789-5604

APPLICATION FOR RESIDENTIAL UTILITY SERVICE

Date: _____ Social Security # of Applicant: _____

Name:	Last Name	First Name	M. I.	Spouse: First Name	M.I.
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Number Of Occupants <input style="width:40px; height:20px;" type="text"/>	New Service Address - Street	Home / Cell Phone
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Email address: _____

Employer	Business Phone
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Spouse Employer	Business Phone
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Renters: *A copy of your utility bill may be given to your landlord, along with any delinquent notices.* _____ (Initial Here)

Landlord Name _____ Phone _____

Complete Previous Address:	Name of Previous Utility
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The Customer hereby acknowledges that they will abide by all terms and conditions of service as set forth in K.M.U.'s Electric Service Rules and Regulations (copy available upon request). The Customer also agrees to provide an easement for the utility secondary service conductors actually used to deliver electricity to the premises. A description of the point of demarcation of ownership between K.M.U.'s electrical facilities and the customer-owned electrical facilities is as follows: Overhead service - Contact point on the House / Underground Service - Utility Right-of-Way.

Meters are the property of Kenyon Municipal Utilities.

I acknowledge that the above information is correct and I grant permission to KMU to register the electric utility account under my name and thereby accept all associated responsibilities including financial.

Customer Signature: _____

Date: _____

FOR OFFICE USE:

Account # _____
 Deposit Paid \$ _____ Date _____
 No Deposit - Letter of Credit Received _____
 Deposit Refunded: Date _____ \$ _____
 Deposit Amount Applied to Final Bill: \$ _____ Date _____

ROUNDUP PROGRAM: _____ YES _____ NO

PICTURE IDENTIFICATION REQUIRED.