

NEW SERVICE REQUEST

Date of Request: _____

Turn On Date: _____

Customer Name

Phone Number

Service Location

SSN/DLN

Mailing Address

City State Zip Code

Customer Signature: _____ Date: _____

Witness by my hand that I am a notary of the state of _____, and do hereby certify that
on the date of _____, personally appearing before me was _____. I
certify that he/she is the person on this form and verify their photo is valid for the purposes of identification.

Notary Signature: _____ My commission Expires: _____

Photo ID must accompany form. Any application received without a Photo ID will be rejected and the applicant will be required to start the process over.