



**COMMERCIAL APPLICATION FOR UTILITY SERVICES**

CITY OF GRAHAM  
201 S MAIN ST  
GRAHAM, NC 27253  
PHONE (336) 570-6700 FAX (336) 570-6703

**PLEASE PRINT CLEARLY !!!**

BUSINESS NAME \_\_\_\_\_

SERVICE ADDRESS \_\_\_\_\_

DATE OF SERVICE \_\_\_\_\_

TAX ID NUMBER (EIN) \_\_\_\_\_ BUSINESS PHONE NUMBER \_\_\_\_\_

OWNER/MANAGER NAME: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION 24 HOURS A DAY**

NAME: \_\_\_\_\_, PHONE ( \_\_\_\_ ) \_\_\_\_\_

ADDRESS (Street Address Only, no PO Boxes) \_\_\_\_\_

\_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
(IF DIFFERENT FROM ABOVE)

WOULD YOU LIKE YOUR ACCOUNT TO BE DRAFTED? YES NO

WOULD YOU LIKE TO HAVE YOUR BILL E-MAILED? YES NO

Remember that enrollment in the e-billing program will discontinue your mailed statement.

YOUR SIGNATURE AUTHORIZES A CREDIT REPORT TO BE ACCESSED.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

Pursuant to 42 U.S.C. 405 (c)(2)(C)(i), Personal information collected by the City of Graham will only be used to ensure proper identification in the pursuit of delinquent charges. In no case will the information provided be shared, sold, or otherwise made available for public inspection. The disclosure of an applicant's social security number is voluntary.