



## APPLICATION FOR RESIDENTIAL UTILITY SERVICE

1 Morgan Drive ♦ Oberlin, KS 67749 ♦ Phone: 785-475-2217 ♦ Fax: 785-475-2925 ♦ Email: [ubclerk@oberlinkansas.gov](mailto:ubclerk@oberlinkansas.gov)

*Application requirements: government-issued photo identification, proof of social security number, and, if renting, a completed Rental Verification Form*

Date: \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_

Service Address: \_\_\_\_\_ Service Request Date: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Previous Address: \_\_\_\_\_ Do you need to transfer services? Yes (\_\_\_) No (\_\_\_)

Disconnect Date for services at previous address: \_\_\_\_\_ Previous Account Number: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Driver's License or ID #: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_ Employer's Name: \_\_\_\_\_

Employer's Address & Phone #: \_\_\_\_\_

**Co-Applicant Name:** \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_ Phone #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Driver's License or ID #: \_\_\_\_\_ State: \_\_\_\_\_

Email Address: \_\_\_\_\_ Employer's Name: \_\_\_\_\_

Employer's Address & Phone #: \_\_\_\_\_

**Please list the names of all adult occupants who will reside in the home:**

\_\_\_\_\_  
\_\_\_\_\_

Have you had services previously with The City of Oberlin? Yes (\_\_\_) No (\_\_\_)

Do you rent (\_\_\_) or own (\_\_\_) Landlord's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

## Connection Questionnaire

Would you like your payments drafted from your Bank Account? Yes (  ) No (  )

\*\*Enrollment forms are available on our website at <https://oberlinkansas.gov/uploads/authorization-to-draft-account-print.pdf> Please note that transferring services will require setup of a new account to continue with automatic bank draft.

Do you have another person or agency you would like a copy of your statements mailed to? Yes (  ) No (  )

\_\_\_\_\_

Do you have dogs? If so, how many? \_\_\_\_\_ Yes (  ) No (  )

\*\*Dogs are required to be licensed annually with the city

## Social Security Number Privacy Policy

### Protection of Information

The City of Oberlin recognizes the importance of maintaining the confidentiality of Social Security numbers and shall protect this information at all times by storing it electronically. Access to this information shall be limited to City of Oberlin customer service employees only. This information shall be destroyed approximately four years after the customer has terminated all services, unless it is retained for collection purposes. This information may be provided to credit or collection agencies.

I acknowledge receipt of this privacy notice.

\_\_\_\_\_  
Applicant Printed Name

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant Printed Name

\_\_\_\_\_  
Co-Applicant Signature

\_\_\_\_\_  
Date

## Utility Application Agreement

The Applicant, whose signature appears below, applies to The City of Oberlin for some or all of the following services: Electric, Water, Sewer, Garbage, and other services incident thereto, to be supplied at the address herein described. The Applicant agrees to pay a \$25 connection fee for each electric and water connection. The Applicant agrees to pay for said services as bills are rendered; therefore, in accordance with the rates, rules, and regulations as provided in the City Code as now existing or as may be enacted and in effect at the time of delivery, regardless of who the consumer might be. The Applicant further agrees to release and discharge said City of Oberlin from a liability for damages suffered (1) by reason of electric or water currently furnished to the premises, or (2) by reason of interruption, discontinuance or disconnection of service hereunder from any cause other than negligence by the City of Oberlin or (3) by reason of the condition, maintenance, location, or existence of any of the facilities, fixtures or systems located on or adjoining the property supplied and by which services are furnished and delivered. Service requests for disconnections will be processed within two business days. Applicant agrees to follow all current or as amended policies and procedures established in the Oberlin City Code. Such policies and procedures can be found on the links provided here: [www.oberlinkansas.gov](http://www.oberlinkansas.gov)

I swear and affirm under penalty of perjury that all claims and information provided are true and accurate.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant Signature

\_\_\_\_\_  
Date