

# City of Terrytown

116 Terry Blvd  
(308) 632-7212 Phone

Gering, NE 69341  
cityofterrytown@cityoftt.com

## Application for Utilities

*This information will be considered strictly confidential and will be used only as appropriate for maintaining and collecting utility bills.*

Date of Application: \_\_\_\_\_ Date Service Requested: \_\_\_\_\_

**The deposit for utility service is \$100.00.**

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

PO Box #/ Mailing Address: \_\_\_\_\_

Service Address: \_\_\_\_\_

Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_

Driver's License # \_\_\_\_\_ Name of Employer \_\_\_\_\_

Other Adult(s) in Household \_\_\_\_\_

Other Adult(s) in Household Phone # \_\_\_\_\_

If Rental, Name & Address of Landlord: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

Applicants Social Security # \_\_\_\_\_

Verified \_\_\_\_\_

Applicants Driver's License # \_\_\_\_\_

Verified \_\_\_\_\_

Customers who have proof of a current account with a city, or other utility provider, that is in good standings for at least a 6 (six) month time period may not need to pay a new meter deposit.

"This institution is an equal opportunity provider"

"Esta institución es un proveedor de servicios con igualdad de oportunidades".

**A copy of your Driver's License or State ID Card is required.**

### Third Party Notification

The City of Terrytown may notify my landlord, or the third party listed below of any proposed discontinuance of utility services. \_\_\_\_\_ (Initials)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

### Utility Deposit Payment

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

Amount  
Paid: \_\_\_\_\_

Cash \_\_\_ Check \_\_\_

I Have received a copy of the  
Utilities Information.

\_\_\_\_\_(Customer Initials)

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Date of Application: \_\_\_\_\_ Date Service Requested: \_\_\_\_\_

**The deposit for utility service is \$100.00.**

Deposits are kept until the date the renter moves out of the rental. The deposit will be applied to the final bill first. Any remaining balance will be returned to the renter or applied to the new rental property if the new property is within the City of Terrytown.

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Service Address: \_\_\_\_\_

Phone # \_\_\_\_\_

Driver's License # \_\_\_\_\_ Verified

Social Security # \_\_\_\_\_ Verified

Name of Employer \_\_\_\_\_ Employer's Phone # \_\_\_\_\_

If Rental, Name & Address of Landlord: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Phone # \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

\_\_\_\_\_ Date

Customers who have proof of a current account with a city, or other utility provider, that is in good standings for at least a 6 (six) month time period may not need to pay a new meter deposit.

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**A copy of your Driver's License or State ID Card is required.**

### Third Party Notification

The City of Terrytown may notify my landlord, or the third party listed below of any proposed discontinuance of utility services, and further accepts responsibility for unpaid bills.

\_\_\_\_\_ (Initials)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

### Utility Deposit Payment

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

Amount Paid: \_\_\_\_\_

Cash \_\_\_\_\_ Check \_\_\_\_\_

I have received a copy of the Utilities Information.

\_\_\_\_\_ (Customer Initials)