



Town of Greybull

APPLICATION FOR UTILITY SERVICE

Town of Greybull
P.O. Box 271
24 South 5th Street
Greybull, WY 82426
307-765-9431 Fax # 307-765-2409

Current Date: _____ Date of Service: _____

I hereby apply to the Town of Greybull for utility service at the service address shown below. I agree to accept services and to pay for same as bills are rendered, in accordance with the Town's schedule and rules applicable to those bills. A \$100 deposit is required if you do not own the property.

I also understand that the water meter is the property of the Town and I am responsible for its protection from damage or freezing.

Name: _____ Service Address: _____

Mailing Address: _____ Phone #: _____

Are you the property owner? Yes ___ No ___ If no, please list the name and contact number of property owner: _____

Name of Employer: _____ Phone #: _____

Spouse's Name: _____ Phone #: _____

Emergency Contact: _____ Phone #: _____

Have you ever had utility services with the Town of Greybull? Yes _____ No _____

If yes, please list name and address of prior service: _____

Signature of Applicant *Date*

Please return this signed form to Town Hall at the above address with the \$100 deposit, if applicable.

Office Use Only

Property Owner: Yes: _____ No: _____ Owner Account #: _____

Renter: Date of Deposit: _____ Receipt #: _____

This institution is an equal opportunity provider.