

# Town of Louisburg

110 W. Nash Street, Louisburg, NC 27549 (919) 496-3406 Fax (919) 496-6319

## Residential Application for Electrical Service

The undersigned (hereinafter called Applicant) hereby applies for electrical service from the Town of Louisburg, North Carolina (hereinafter called the Seller) and agrees as follows:

### THE LOCATION OF THE PROPERTY FOR WHICH SERVICE IS APPLIED:

When the Seller makes electric energy available to the applicant, the Applicant agrees to purchase from the Seller, and pay monthly to the Seller all electric energy used on the premises described above now owned or occupied by the Applicant, in accordance with the rate schedule and rules and regulations as may be established from time to time by the Seller.

The Applicant will cause his premises to be wired in accordance with the National Electrical Code as established by the National Board of Fire Underwriters and will comply with and be bound by the provisions of the rules and regulations of the Seller, as may be adopted from time to time. **The acceptance of the application by the seller shall constitute an agreement between the applicant and the Seller. This contract for electrical service shall continue in force one-year from the date service is made available by the Seller to the Applicant, and thereafter until canceled by written notice given by either party to the other at least (30) days in advance.**

◆ **NOTE: a new account service fee of \$12.00 will appear on your first utility bill and is non-refundable.**

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Last Address where you lived

\_\_\_\_\_  
Address you are moving to in Louisburg

\_\_\_\_\_  
Utility serving your previous address

\_\_\_\_\_  
Employer - Name, address & phone #

\_\_\_\_\_  
Your home phone number

\_\_\_\_\_  
Drivers License or ID number(required)

\_\_\_\_\_  
Social Security number(required)

\_\_\_\_\_  
Date of this application

\_\_\_\_\_  
Name and Phone number of landlord

\_\_\_\_\_  
Your desired date of service connection

\_\_\_\_\_  
Name & Number of relative or person  
to call in case of Emergency

\_\_\_\_\_  
Applicants Signature

◆ Have you ever had utilities with the Town of Louisburg before? If so, what was the address of your previous service and how long ago was it. \_\_\_\_\_

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**For office use only:**

**Online service have been verified by \_\_\_\_\_ Deposit amount paid \$ \_\_\_\_\_**

**Other: \_\_\_\_\_**

**\*\*\*\*\*ATTACH A COPY OF THE RENTORS AGREEMENT IF APPLICANT IS RENTING\*\*\*\*\***