

**CITY OF WALKER**  
**APPLICATION FOR UTILITY SERVICES Commercial/builder Customer**

**Business Name:** \_\_\_\_\_ **(phone)** \_\_\_\_\_  
(Name the account will be under)

**Owners Name:** \_\_\_\_\_ **(phone)** \_\_\_\_\_  
(Last) (First) (Middle)

**Service Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

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

**Accounts Payable Contact:** \_\_\_\_\_ **(phone)** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Tax ID #:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Persons authorized to discuss account & phone numbers:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CHECK ONE:**

**Inside City Limits:** Yes: ☐ No: ☐

**Property:** Own ☐ Rent ☐ **Builder:** ☐ **Type of Business** \_\_\_\_\_

**Services Requested:** Gas ☐ Water ☐ Sewer ☐ Garbage ☐ **Do you have a dumpster?** \_\_\_\_\_

**Gas Used For:** Water Heater ☐ Commercial Kitchen ☐ Furnace ☐ Fireplace ☐ Generator ☐ Pool heater ☐

**Other** ☐ **List:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, the undersigned agent for the Business, hereby request the City of Walker (Hereinafter called "City") to render utility services at service address listed on this application, and agree that the Business will pay the City for all such services required on the premises at that service address as long as the business occupies or controls the premises and until such time as the Business gives the City notice that it no longer occupies or controls the premises. I understand that all bills will be due upon receipt, and that any bill not paid by the due date, will be charged a **penalty fee** of 10% of the current bill. I also understand that if payment is not received by the due date, services are subject to be disconnected with no further notice. I understand that if the Business does not pay the bill in full by the 7<sup>th</sup> day after the due date, the Business will have to pay the bill in full, plus an administrative fee of \$20.00 in order to be re-connected. I further authorize the City to enter the premises for the purpose of activating or de-activating services. I also understand that the Business will be charged a minimum charge from the day services are connected until the regular reading date, even if it is less than one month. I have been informed that if there have never been services at this address before, it will take a minimum of fourteen (14) working days **AFTER** payment has been received in this office to have services ready for me. I agree that if the City renders the service herein requested that this request shall become a contract between the Business and the City. I further agree that as owner of the Business, I will be personally liable to the City for any amounts owed by the Business to the City for utility services. I understand that this contract is not transferable or assignable.

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **Surety's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**OFFICE USE ONLY**

**GAS:** TAP: \_\_\_\_\_ **WATER:** TAP: \_\_\_\_\_ **SEWER:** TAP: \_\_\_\_\_ **GARBAGE:** **DEPOSIT NO:** \_\_\_\_\_

DEPOSIT: \_\_\_\_\_ DEPOSIT: \_\_\_\_\_ TIE-IN: \_\_\_\_\_ DEPOSIT: \_\_\_\_\_ ☐ **C/C:** \_\_\_\_\_

SERVICE CHG: \_\_\_\_\_ SERVICE CHG: \_\_\_\_\_ DEPOSIT: \_\_\_\_\_ ☐ **Cash**

SERVICE EXTEND: \_\_\_\_\_ SERVICE CHG: \_\_\_\_\_ ☐ **Check** \_\_\_\_\_

**Total Amount:** \_\_\_\_\_ **Date Paid:** \_\_\_\_\_ Must provide act of cash sale as proof of ownership

**Previous Customer:** \_\_\_\_\_ **Acct#:** \_\_\_\_\_

**Application Taken By:** \_\_\_\_\_  
**Mon – Thursday 7:00 -4:30**

**Procedures available upon request**

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# CITY OF WALKER

**RICK RAMSEY, MAYOR**

**MAYOR PRO TEM:**  
TRACEY GIRLINGHOUSE

**ALDERMAN:**

**CLERK:**  
Myra Streeter, CAA/CMA

JONATHAN DAVIS  
GARY GRIFFIN  
SCARLETT MILTON MAJOR  
PAUL ROBERTS JR.

**TOWN ATTORNEY:**  
Irys Allgood

## City of Walker Billing Terms

- All bills are dated the last day of the month and they are due on the 4<sup>th</sup> Wednesday of the month.  
*Example: Bill date December 31<sup>st</sup> making the Due Date the 4<sup>th</sup> Wednesday of January.*
- Billing is done in arrears which means we bill one month behind. This will cause you to receive your first bill in \_\_\_\_\_.
- You should receive your bill by the 15<sup>th</sup> of each month. If you do not receive your bill by the 15<sup>th</sup> please call our office during normal office hours at 664-3123 to get the balance on your account.
- Office hours:  
Monday – Thursday: 7:00 AM - 5:30 PM  
Closed on Friday
- If not paid by the due date on the bill a 10 % late fee will be assessed after 5:30 PM of the due date.
- We have two night deposit boxes. One located to the right of the front door. The other located in the back of the parking lot next to the FedEx drop box.
- If payment is not made services are subject to disconnect 7 days after the due date.
- On the 8<sup>th</sup> day after the due date a \$20.00 administrative fee will be placed on your account.
- If your services are disconnected the bill must be paid in full with cash, credit or debit card. **NO CHECKS WILL BE ACCEPTED ON DISCONNECTED ACCOUNTS.**
- Procedures are available upon request.

**I have read and understand the City of Walker Billing Terms.**

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

**Clerk:**\_\_\_\_\_

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