



# UTILITY SERVICE APPLICATION

City of Oak Ridge North  
27424 Robinson Road  
Oak Ridge North, Texas 77385

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**PLEASE PRINT**

RESIDENTIAL	COMMERCIAL
Customer Name: _____	Business Name: _____
Spouse's Name: _____	Contact Name: _____
Service Address: _____ _____	Service Address: _____ _____
Billing Address: _____  (if different than service address)	Billing Address: _____  (if different than service address)
Home Phone: _____	Home Phone: _____
Work Phone: _____	Work Phone: _____
<input type="checkbox"/> OWN <input type="checkbox"/> RENT	<input type="checkbox"/> OWN <input type="checkbox"/> RENT
Property Owner: _____ (if different than applicant) Address: _____ _____	Property Owner: _____ (if different than applicant) Address: _____ _____
Phone: _____	Phone: _____
Name of authorized person(s) to make changes to your account: 1. _____ 2. _____	Name of authorized person(s) to make changes to your account: 1. _____ 2. _____

NEW BUSINESS MUST COMPLETE APPLICATIONS FOR  
CERTIFICATE OF OCCUPANCY AND FIRE PERMIT.  
\*\*PLEASE CONTACT THE PERMIT DEPARTMENT\*\*

**A resident may request that their address and telephone number be kept confidential. If a resident makes such a request of confidentiality, the City shall keep the address and telephone number confidential unless required or mandated by law.**

YES – Request for confidentiality.

NO – Do not request confidentiality.

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Customer's Email Address

REQUESTED CONNECT DATE: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Service Rep \_\_\_\_\_ Deposit \$ \_\_\_\_\_ Date Paid \_\_\_\_\_ RN# \_\_\_\_\_  
Account No \_\_\_\_\_ Applicant DL# \_\_\_\_\_