



UTILITY SERVICE APPLICATION

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

Tel: (281) 367-1189
Fax: (281) 367-7729
dembry@oakridgenorth.com

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 DL# (A copy of driver's license is required)

REQUESTED CONNECT DATE: _____

FOR OFFICE USE ONLY

Service Rep _____ Deposit \$ _____ Date Paid _____ RN# _____

Account No _____