

**CITY OF SEALY, TEXAS**

*Please print.*    **APPLICATION FOR COMMERCIAL/MULTI-FAMILY UTILITY SERVICE**    *Please print.*

Business Name: \_\_\_\_\_

Service Address: \_\_\_\_\_

Billing Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Federal Tax Identification Number: \_\_\_\_\_

Date Business Founded/Incorporated: \_\_\_\_\_

Type of Business (e.g., restaurant, supermarket, apartment complex, etc.): \_\_\_\_\_

Local Manager or Other Contact Person: \_\_\_\_\_

Type of Property:

**Owned**

**Rented/leased from** — Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Utility services requested:     Water     Sewer     Gas

When would you like the requested utility services to start?    Date: \_\_\_\_\_    Time: \_\_\_\_\_  
*(The Utility Department is open Monday through Friday from 7:30 a.m. to 4:30 p.m.)*

Applicant's Signature: \_\_\_\_\_    Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Application taken by: \_\_\_\_\_    Date: \_\_\_\_\_    Water: Deposit # \_\_\_\_\_    Amount \$ \_\_\_\_\_

Utility account set up by: \_\_\_\_\_    Date: \_\_\_\_\_    Gas: Deposit # \_\_\_\_\_    Amount \$ \_\_\_\_\_

Account # \_\_\_\_\_    Work Order # \_\_\_\_\_    Payment:  Check     Cash    Total \$ \_\_\_\_\_