

APPLICATION FOR SERVICE

Village of Enosburg Falls, Inc.

42 Village Drive, Enosburg Falls, VT 05450
802-933-4443 fax 802-933-4145

Welcome to the Village of Enosburg Falls Electric, Water and Sewer Departments. We understand you have purchased or rented the property listed on the reverse side of this letter and wish to obtain utility service.

Please fill-out and sign the application on the reverse side of this letter. You must submit the completed application to our office along with a copy of your driver's license or state identification card, passport or similar form of positive identification.

The deposit amount listed on the reverse is required unless creditworthiness can be proven. Applicants may show proof of their creditworthiness by:

- a) providing a reference from a bank indicating that you have had an active checking account for at least one year and that no account has been overdrawn within the last year OR
- b) providing a letter from one or more utilities or cable television companies within or outside of the state of Vermont indicating that you have maintained a good credit record for the past two years OR
- c) providing a written statement from a creditworthy utility customer of the Village of Enosburg Falls guaranteeing payment of your account.

In order to connect your service, the deposit or evidence of creditworthiness must be in our office on or before the date we are to connect your service.

The security deposit, if required, is based on two-twelfths of an average annual usage for the location. The deposit will earn interest at a rate determined by state regulations. Deposits are refunded after twelve consecutive months in which the member has not been disconnected and has received no more than three disconnection notices. The necessity of a deposit or its amount may be disputed by making a formal complaint to the Department of Public Service at 112 State Street, Montpelier, VT 05602 or telephone 1-800-622-4496. If the deposit amount presents a burden, please contact our office for assistance with a payment plan.

The undersigned (hereinafter called the "Applicant") applies for membership and electric service from the Village of Enosburg Falls. Applicant agrees:

1. To comply with and be bound by the Ordinances of the Village of Enosburg Falls and the rules and regulations adopted by the Board of Trustees according to law.
2. That by Applicant signing this Application and dealing with the Village of Enosburg Falls, the terms and provisions of the Ordinances of the Village of Enosburg Falls will be a contract between the Village of Enosburg Falls and the Applicant, and both the Village of Enosburg Falls and the Applicant are bound by the contract as fully as though the Applicant had individually signed a separate instrument containing such terms and provisions; and that upon acceptance of this application by the Village of Enosburg Falls it also will constitute a contract for electric service between the Applicant and the Village of Enosburg Falls;
3. To purchase all electric energy used on the premises from the Village of Enosburg Falls, to pay for such energy on a monthly basis at rates determined in accordance with law and the Ordinances of the Village of Enosburg Falls, and to deposit with the Village of Enosburg Falls such consumer deposits as required.

If you have any questions, our office staff would be pleased to help you. Our telephone number is (802) 933-4443. Our office hours are 7AM – 4PM, Monday – Friday, except for Holidays.

APPLICATION VILLAGE OF ENOSBURG FALLS

Account Number: _____ Prev. Customer: _____

Service Location: _____

DATE OF OCCUPANCY OR DATE THE METER(S) SHOULD BE READ _____

Please Circle: OWNER TENANT Primary Residence: YES NO

If you are a tenant, please provide the name, address, and daytime phone number of the landlord/owner:

**** If providing a credit reference, it must be received in our office by _____ (5 business days).**

Total Deposit Amount Required: _____ (please choose one of the payment options below):

Option #1: Enclose full payment of _____

Option #2: Enclose partial payment of _____. Then _____ will be charged on your first bill and _____ will be charged on your second bill.

Initial Fee of \$30.00 for establishing an account will be assessed on your first bill.

Please fill out all the information below completely. (Please Print)

New Customer Information:

First Name: _____ Middle Initial _____ Last Name _____

Date of Birth: _____ Social Security #: _____ Driver License#: _____

Phone: Home: _____ Cell: _____ Work: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Date Signature (Customer)

I give the following person(s) permission to discuss my account with The Village of Enosburg Falls:

Joint Customer Information:

First Name: _____ Middle Initial _____ Last Name _____

Date of Birth: _____ Social Security #: _____ Driver License#: _____

Date Signature (Joint Customer)