## Application for Utility Service

Previous City of Canton o	customer If yes, v	vhen	
Owner Renter	Residential	Commercial	
Name(s) to be listed on a	account (Note: only people listed b	elow will have access to account inf	ormation)
First	Last		Middle Initial
First	Last		Middle Initial
First	Last		Middle Initial
Name of business (if applic	able)		
If rental property, owner	's name		
Physical Address (house nur	mber and street name)		
P.O. Box (if applicable)	Mailing address (	(if different)	
	City	State	Zip Code
Contact information			
Name	Cell Phone	Home Pho	ine
Work Phone	Email		
Name	Cell Phone	Home Pho	ine
Work Phone	Email		
Name	Cell Phone	Home Pho	ne
Work Phone	Email		
Service start date		Garbage tote size	
property you should e	paid utility bills may becon ensure the final utility bill – ear as a special assessment	- in the name of the prior o	wner – is paid or it may

## Acknowledgement

I (we) agree to supply the City of Canton with my (our) forwarding address and final utility account payment with 10 days of the final bill.

I (we) understand payment for utility services is required **IN FULL** by the due date printed on my (our) monthly utility bill.

I (we) understand my (our) service may be disconnected for non-payment and agree to pay a reconnect fee.

CERTIFICATION: The applicant agrees to: comply with the rules and regulations of the City of Canton Public Utilities and all other municipal ordinances as they pertain to the public utilities currently in force and hereinafter enacted; understands the delivery of service creates no legal liability, express or implied, on the municipality; and certifies all information in this application is accurate.

Applicant's signature	Date
Applicant's signature	Date

## **Applicant Data Record**

Please provide the following information so the City of Canton will be in compliance with Title VI of The Civil Rights Act of 1964. In order to meet the requires of the Federal Register Vol. 62 No. 210, Revision to the Standards for the Classification of Federal Data on Race Ethnicity, all application forms for city utility connections must include below the signature and date black the following disclosure statements.

The following information is required by the Federal Government in order to monitor compliance with the federal laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note race/national origin of individual applicants on the basis of visual observation or surname.

Please check all that apply:

 Racial Categories

 American Indian or Alaskan Native \_\_\_\_\_\_

 Asian \_\_\_\_\_\_

 Black or African American \_\_\_\_\_\_

 Native Hawaiian or Pacific Islander \_\_\_\_\_\_

 White

Ethnic Categories	
Hispanic or Latino	
Not Hispanic or Latino	

In accordance with Federal Law and the U.S. Department of Agriculture Policy, the City of Canton is prohibited from discriminating on the bases on race, color, national origin, sex, disability, religion and familial status. If you feel you have been discriminated against: to file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue SW, Washington DC, 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TTD).

The City of Canton is an equal opportunity provider and employer.