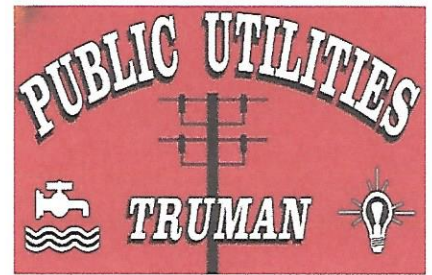


Application for Utility Service

Truman Public Utilities

Electric – Water – Sewer



I hereby make application for service for the following property of which

I am the: _____ Renter _____ Owner

Occupancy Date: _____

Address: _____

Name of person personally responsible for utilities at the premises as primary obligor:

_____ (Last) _____ (First) _____ (Middle)

_____ (Social Security Number) _____ (Drivers License Number) _____ (Phone#)

Place of Employment: _____ Phone# _____

**Additional Name on the Account. In addition to the primary obligor; the undersigned does personally and unconditionally guarantees the due and punctual paymnet for charges of utility services to the premises.*

_____ (Last) _____ (First) _____ (Middle)

_____ (Social Security Number) _____ (Drivers License Number) _____ (Phone#)

I (we) agree to use the service and make payments according to the rules of the Truman Public Utilities Commission.

Signature: _____ Date: _____

Signature: _____ Date: _____

Deposit Required: \$300.00

Full payment of the deposit is required to setup services.

If you can provide a Letter of Credit from your current utility company stating you paid on time for the last 12 consecutive months, then the \$300.00 is waived.

Tennessee Warning / Waiver of Claims

As an applicant for utility services by Truman Public Utilities in the City of Truman, Minnesota, I have voluntarily supplied data about myself which may be public and/or private in nature.

I understand that, as part of the application, I am requested to supply this information. I understand that failure to provide accurate and adequate data may disqualify me from receiving services.

I understand that the data which I have provided may be shared in whole, or in part, by other agencies, by other private and public entities and by other persons, for the purpose of establishing credit worthiness.

I therefore, waive my right to claim and hereby agree to hold harmless Truman Public Utilities and the City of Truman, Minnesota and any of its agents or employees for any injury or damage which I may experience as direct or indirect result of the intended use of this information.

Signed: _____ Date: _____

Printed: _____ Date: _____

Witness: _____ Date: _____