Brazil Utilities New Service Application

DEPOSIT AND SERVICE FEE MUST BE CASH, CHECK, OR MONEY ORDER

Date to Establish Service:	Time to Schedule Turn On:	Account Number: (Office Use Only)
Last Name:	First Name:	Middle Initial:
Spouses Name:		Number of People in Home:
OR Business Name:		
Service Address:		
Mailing Address: (If Different)		
Phone Number:	Social Security Number:	Tax ID Number (Businesses Only):
Are you renting? Yes N If Yes: Name of He		
	<u>-</u>	-
Are you Buying: Yes	No Are you Buying o	on Contract? Yes No
Have you had service in Brazil before f Yes, list the most recent address:		
f you have current service and would Date to Disconnect: Service Address:		
Deposit (See Breakdown) New Customer/ Previous Customer Previous Customer with Good Stan	Requirements for New Se • St • w/ Bad Credit: \$100.00	
Service Fee \$20.00		
		ation in my file without my approval. I
Address:		
Phone Number:	Soc	ial Security Number of Driver's License Number:
Customer Signature:	l	Date:
or Office Use Only:		
Paid Deposit/Fee Receip	Custor	mer:
Entered Deposit Deposit An Added Other	n: 🎍 Servi	*If email Wallace, add notes to the account*

Orders:

Printed For Different Day:

Yes

☐ No

Yes No

Charges: