

**Account:** \_\_\_\_\_



Town of Ferdinand  
2065 Main Street  
FERDINAND, IN 47532-0007  
Phone 812-367-2280  
Fax 812-367-1303  
E-mail: [twnofferdinand@psci.net](mailto:twnofferdinand@psci.net)  
[www.ferdinandindiana.org](http://www.ferdinandindiana.org)

**Application for Utilities:**

Date of Application: \_\_\_\_/\_\_\_\_/\_\_\_\_ Service to Begin: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of Applicant(s): \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
And Driver's License Number: \_\_\_\_\_  
: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
And Driver's License Number: \_\_\_\_\_

Ferdinand Address: \_\_\_\_\_  
Mailing Address for Utility Bill (if different from above): \_\_\_\_\_

If applicant is a tenant, please fill in Name & Contact information of owner of the property:

Name & Address: \_\_\_\_\_

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

Work Number(s): \_\_\_\_\_ & \_\_\_\_\_ (For Emergency Reasons Only)

E-Mail: \_\_\_\_\_

Telephone Number(s) Home: \_\_\_\_\_ Cell Phone(s): \_\_\_\_\_

Previous Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Prior Utility Service Dates (at PREVIOUS address): From: \_\_\_\_\_ to: \_\_\_\_\_

Last Utility Company(s): \_\_\_\_\_

Electric Co: \_\_\_\_\_, City: \_\_\_\_\_  
Water Co: \_\_\_\_\_, City: \_\_\_\_\_  
Sewer Co.: \_\_\_\_\_, City: \_\_\_\_\_  
Gas Co.: \_\_\_\_\_, City: \_\_\_\_\_

If Utilities were in another name(s),  
please list name(s) & address:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone number: \_\_\_\_\_

I request the Utility Service at the above location and will be responsible for all related charges. I agree to pay all collection cost and attorney fees incurred in the recovery of any past due balance(s). I hereby authorize the release of the information.

Signed: \_\_\_\_\_  
: \_\_\_\_\_

\*\*\*\*Please provide a copy of your driver's license(s) with the utility application, for identification purposes. Also fill out the back side of the application. Thank You.

**To Utility Provider:**

The above named person(s) has requested utility service from this utility and has indicated that they were a prior or current customer. We would appreciate the following information. Please circle the correct answer.

- (1) Has the applicant been a customer of yours in the past two years? \_\_\_\_ (Yes) (No)
- (2) Does the applicant have any outstanding balances due you? \_\_\_\_ (Yes) (No)
- (3) Did the applicant, during the past two years, have more than two delinquent bills? \_\_\_\_ (Yes) (No)
- (4) Within the past two years has the applicant had service disconnected for nonpayment? \_\_\_\_ (Yes) (No)

PLEASE MAIL OR FAX OR E-MAIL TO THE OFFICE ADDRESS ABOVE. THANK YOU

METER DEPOSIT MADE: \_\_\_\_ Yes \_\_\_\_ No Amount: \$ \_\_\_\_\_  
Date Paid: \_\_\_\_/\_\_\_\_/\_\_\_\_ Rec #: \_\_\_\_\_

**DATA COLLECTION**  
**Title VII Civil Rights Act of 1964**

Under Title VI Civil Rights Act of 1964 recipients of Rural Development assistance must maintain, for compliance review and discrimination complaint investigation purposes by Rural Development and other appropriate agencies, various types of data by race and national origin. The recipient must maintain this data to show the extent to which members of protected groups are participants and beneficiaries of the Rural Development assisted program. The following statement and data collection should be used on all application forms:

**INFORMATION FOR GOVERNMENT MONITORING PURPOSES**

The following information is requested by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, 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 to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.

APPLICANT:             I do not wish to furnish this information.

Ethnicity:             Hispanic or Latino  
                          Not Hispanic or Latino

Race/National Origin (select one or more):

- American Indian or Alaska Native (not Alaskan)
- Asian
- Native Hawaiian or Other Pacific Islander
- Black or African American
- White

Gender:               Female  
                          Male