



1717 EVA RD NE, CULLMAN, AL 35055 – PO BOX 278 CULLMAN AL, 35056

APPLICATION FOR UTILITY SERVICES

WATER/SEWER: Phone (256) 775-7210 Fax (256) 737-5442
SANITATION: Phone (256) 737-7560 Fax (256) 737-7532

Date of Application: _____ Requested Date of Service: _____

Please check 1 (one) of the following:

RESIDENTIAL _____ **COMMERCIAL** _____ **INDUSTRIAL** _____

If Residential, do you Own or Rent? _____

If renting: Landowner Name: _____ Telephone: _____

Owner Signature (if applicable): _____

Owner's Mailing Address: _____

Name: _____

Service Address: _____

City: _____ State: _____ Zip: _____

Billing Address (if different): _____

City: _____ State: _____ Zip: _____

Email Address: _____

Phone Number: _____

Driver's License Number **(Required)**: _____

Tax ID and/or SSN **(Required)**: _____

If transferring service with the City of Cullman, list the service address of property for disconnect.

_____ Disconnect Date _____

I/WE certify that the information provided for this application is true and correct.

Owner/Customer

Date

Owner/Customer

Date