

One Troyan Drive, Meadows Place, TX 77477 • (281) 983-2950 Fax (281) 983-2940, utilities@cityofmeadowsplace.org Monday-Friday, 9:00 a.m. - 4:00 p.m.

Commercial Utilities Application

This form may ONLY be submitted <u>in person</u>. The business owner's/officer's Driver's License, lease agreement and corporation documents must be provided with this application.

Service Information			
Service Address:			
Date to Begin Serv	rice:/_	/	
Name to Appear or	n Account:		
Type of Business:			
	В	Business Information	
Contact Person:	Last	First	M.I.
Billing Address	Street		Suite
	Street		Suite
	City	State	Zip
Business Phone: Contact Cell:		:	
Email:			
Emergency Proper	ty Contact:		
NOTIFICA	ATION OF TERMS	S AND CONDITIONS FOR U	FILITY ACCOUNTS
appl writ I un at th I un my : resu utili an a	iderstand that a \$2 ication for utilities seen notification to cluderstand that as a sum of rates, which are seederstand a late fee in account is delinqueralt in the discontinuaties service is discordiditional deposit will derstand that that are	abscriber (applicant), I agree to tall et by the City of Meadows Place. In the amount of 10% of the curr out. I understand that failure to p tion of all services without notice. Intinued for non-payment, a recon	ied towards my final bill upon ke and use said utilities service ent balance will be assessed if bay all charges when due may. I understand that in the event anection charge of \$50.00 plus 00.00 (commercial) is required
Signature of Business Owner or Officer		 r Date	