



TENANT APPLICATION FOR RESIDENTIAL UTILITY SERVICE

CITY OF BAY CITY 301 Washington Ave Ste 106
Monday-Friday 7am-5pm * 989-894-8104

Rental **DEPOSIT REQUIRED

IF UNSATISFACTORY OR NO CREDIT HISTORY EXISTS, A DEPOSIT WILL BE REQUIRED
(Utility deposit will be applied to the account when services are terminated. Any credit balances will be refunded)

Utility Deposit Required: \$ _____

- Electric & Water/Sewer Electric Only Water/Sewer Only Other Credit History
 \$175 or \$225 \$75 or \$125 \$100 \$_____

REQUIRED DOCUMENTS: *LEASE AND PICTURE ID *ALL PARTIES ON LEASE MUST BE PRESENT

Service address: _____

Mailing address: _____

Primary E-mail address: _____

Name on Lease: _____ Date of Birth: _____

Driver License/ID #: _____ Social Security #: _____

Phone Numbers: Home _____ Cell _____ Alternative _____

Previous Address: _____

- 65 or Older Disabled (must provide documentation) Life Support needed (must provide documentation)

Tenant Signature: _____ Date _____

Name on Lease: _____ Date of Birth: _____

Driver License/ID #: _____ Social Security #: _____

Phone Numbers: Home _____ Cell _____ Alternative _____

Previous Address: _____

- 65 or Older Disabled (must provide documentation) Life Support needed (must provide documentation)

Tenant Signature: _____ Date _____

Dogs on premises Inside Outside No

LANDLORD INFORMATION (If no lease is provided, owner signature is required):

Landlord Name _____ Contact Number: _____

Landlord Signature: _____ Date _____

ARE YOU ELIGIBLE FOR A SALES TAX EXEMPTION? Yes No

IF YOU ARE ELIGIBLE FOR A SALES TAX EXEMPTION, YOU MUST COMPLETE AND SUBMIT TO THE CITY OF BAY CITY THE MICHIGAN SALES AND USE TAX CERTIFICATE OF EXEMPTION FORM LOCATED AT: http://www.michigan.gov/documents/taxes/3372_216612_7.pdf

Office use only

Is previous address a City of Bay City account? Yes _____ Amount owed \$ _____ No _____ *New Account Number: _____

Reviewed by: _____ Date: _____