

An asterisk (*) denotes a required field) **Schedule Date:** ____ / ____ / ____
(Schedule Date may vary up to 3 business days.)

Continuous Service Agreement:
CSA agreements are for rental properties only. Please inquire with a customer service rep for more information.

Office Use Only:		Read	Connect	Electric	Water
Account# _____ - _____	Own / Rent	Security Deposit: \$ _____		*In order to avoid a security deposit, you can submit 4 completed Credit Reference Forms	
Customer # _____					

Service Address * _____ Apt _____

Business Name: _____ Owner: _____

Mailing Address: _____ City: _____ State: ____ Zip Code: _____

Accounts Payable Rep: _____ Contact Number: (____)-____-____ Alternate Number: (____)-____-____

Tax ID Number: ____-____-____ SIC CODE: _____ Type of Business: _____

All commercial customers are subject to a meter deposit at the discretion of Groton Utilities Customer Service General Manager. The average meter deposit is three times the average utility bill at the service location. In order to avoid this, you can submit credit reference letters filled out and returned by three companies that you do business with on a monthly basis. Credit references must be for the business on the application and include at least one (1) year of history. The reference letter is located on a separate form, please fill out paperwork and submit along with your application in order to waive meter deposit.

Disconnect Commercial Service:

Account# _____ - _____	Phone / In – Person	Electric: Read / Disconnect	Water: Read / Disconnect
Customer Name: _____	Disconnect Date: ____ / ____ / ____		
Forwarding Address _____	City _____	State _____	Zip _____

I / We agree to accept service and pay for said service as bills are rendered, in accordance with the rates, rules and regulations now in effect or as they may be changed or amended. If the account becomes delinquent, the applicant(s) will be responsible for collection fees, including reasonable attorney fees. Please check box to the right and type your full name (if second applicant, both full names are required) into the form box below in order to accept these terms. Submit via email, fax, or in person in order to complete application process.

Full Name(s) (Required): _____

OFFICE USE ONLY:

Meter Deposit			
Account# _____ - _____	Meter Deposit \$ _____	CK CA CC	Rep Initials: _____
Customer Name: _____	Svc Address: _____		Apt _____