

# Tohono O'odham Utility Authority

Highway 86, Mile Marker 112

P.O. Box 816

Sells, AZ 85634

Phone (520) 383-2236

Fax (520) 383-2218

## Application for utility service (Individual):

Please complete the following application to establish service.

Your social security number is required by Tohono O'odham Utility Authority (TOUA) in order to activate your account and commence service, and the SSN may be used by TOUA for collection purposes if your account becomes delinquent.

The undersigned requests Tohono O'odham Utility Authority (TOUA) to supply service (which shall include any and all utility services provided now or in the future by the TOUA at any location as the undersigned hereby requests or may hereafter request or receive from the TOUA), and agrees to receive and pay for all service rendered or reserved for use of the undersigned when bills are rendered therefore in accordance with the rates, rules and regulations of the TOUA in effect at the time the service is rendered. The undersigned has lawful authority to activate the utility services requested. The undersigned acknowledges that from time to time the rates, rules and regulations of the TOUA may be altered, amended or repealed by the TOUA in its sole discretion and no such alteration, amendment or repeal shall affect the undersigned's obligations hereunder. It is agreed that the TOUA may require, as security for payment of bills, a cash deposit of such amounts as it may deem adequate. The undersigned agrees to abide by and be subject to the rules and regulations of the TOUA relating to all service rendered pursuant to this contract. The undersigned accepts financial responsibility for the utilities provided and agree to be responsible for any and all collection fees associated with the collection of delinquent bills, which may amount to 35% of the total amount of delinquent bills, in addition to reasonable attorney fees and court costs. The undersigned acknowledges that the undersigned has read and understands the above and is in agreement with each of the terms of this contract.

**Your application will be processed immediately unless you specify a different effective date.**

[ Please note effective date of service \_\_\_\_\_ ]

**(Please Print)**

Applicant Name \_\_\_\_\_

First

Middle

Last

Type of service being applied for:

Electric  Water  Sewer  Telephone  Internet  Propane  Cellular

Service For:  House  Apt.  Mobile Home  Barn  Garage  Other \_\_\_\_\_

*The applicant certifies that the utility services being applied for **are not** for business purposes and/or property for rental engagement.*

Service Address \_\_\_\_\_

Billing Address (if different from service address) \_\_\_\_\_

Social Security # \_\_\_\_\_ Drivers License # \_\_\_\_\_

Co-applicant Name (if any): \_\_\_\_\_ Co-applicant's S.S. \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work or Cell Phone # \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Co-applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

*A co-applicant is jointly and severally liable for the account. Applicants may also appoint a Personal Representative using a separate form. Personal Representatives may obtain information about the account and take action related to the account (e.g., pay outstanding bills), but may not make changes to the account, including terminate the account.*

Board Approved: April 26, 2017