

City of Bessemer City, North Carolina
Application for Utility Service

Email to: melissa@bessemerncity.com
 FAX to: 704-629-2237

Name of Applicant _____ **Date of Birth** _____
Co-Applicant _____ **Date of Birth** _____
Applicant's ID # _____ **SSN (Social Security #)** _____
(Government-issued photo identification)
Co-Applicant's ID # _____ **SSN (Social Security #)** _____
Service Address _____
Mailing Address _____
Home Telephone # _____
Alternate Phone # _____

Disclosure of a Social Security Number (SSN) is voluntary and not required for service. However, the maximum deposit will apply to applications without a SSN. The SSN's are used solely for the purpose of collection of unpaid billings or other legally authorized purposes such as a court order, warrant or subpoena.
 5 U.S.C. §552a (note)(2007); G.S. 143-64.60; G.S 132-1.10(b)(4).

RESIDENTIAL Own Rent
COMMERCIAL Own Rent
 Residential renters must provide a rental receipt and a copy of a government-issued identification. Commercial applicants must provide a note from Code Enforcement noting zoning compliance.
 If Rental:
Owner of Property _____ **Telephone #** _____
 Most Recent
 Previous Address _____

Have you or Co-Applicant ever had utility service with the City of Bessemer City in the past? Yes _____ No _____
 If yes, **Service Name** _____
Service Address _____

Utility Bills are mailed the last of each month. Bills are due by the 10th of the following month. Unpaid bills are subject to a 5% penalty after the 10th. If not paid by the 15th of the month, services are subject to be discontinued without prior notice. Reconnection fees will apply in addition to the unpaid balance to restore services. If the US Post Office fails to deliver your bill, it is your responsibility to contact City Hall and make required payments in the above time frame.

Utility deposits are non-interest bearing and are based on a credit report received from Online Utility Exchange.

Inquiry responses are:

	Approved	Caution	Alert
Water/Sewer	\$100	\$150	\$300
Gas	\$150	\$225	\$300

Deposits may be waived with a Notarized Guarantee of Applicant's Utility Bill. The Guarantor must be a property owner and established a good payment history for at least two (2) years.

Commercial deposits shall be equal to two (2) months estimated usage, but not less than the abovementioned rates.

Utility service may be discontinued if application information is determined to be false or unpaid utility charges are owed at another location in Bessemer City.

Natural Gas rates change monthly and are posted at City Hall, 132 W. Virginia Ave., Bessemer City, NC.

The undersigned applicant(s) agree to pay for all utility services provided in accordance with the posted rate schedule and the rules and regulations of the City.

Applicant's Signature _____ **Date** _____
Co-Applicant _____ **Date** _____

For City Use Only

Service Account #	Deposit Information			
	Water/Gas	Receipt Number	Amount	Date
Renter				
Owner				
Transfer				

Co-Signor Name _____
Co-Signor Address _____ **Telephone** _____

City of Bessemer City
Notarized Guarantee of Applicant's Utility Service Bill

Security for Account of:

Name

Street Address

Account Number

City, State, Zipcode

This agreement is made this _____ day of _____.

In lieu of a cash deposit for utility service from the applicant, I hereby agree that I will, upon demand of the City of Bessemer City, pay any and all outstanding bills at this or any future location for service rendered to said applicant if for any reason such bills are not paid by the applicant.

I understand that the applicant's unpaid final bill may be transferred to my service account at the address below or any future location and my service may be discontinued if this bill remains unpaid.

Presently, I am a property owner in the City of Bessemer City and have had utility service with the City for at least two years and have established a good payment history.

Signature of Guarantor

Guarantor's Account Number

Street Address

City, State, Zipcode

State of North Carolina

County of Gaston

I, _____, an notary public in and for said county and state, do hereby certify that _____ personally appeared before me this date and acknowledged the due execution of the foregoing instrument.

Witness by hand and official seal. This _____ day of _____, _____.

My commission expires _____.

(seal)

Notary Signature