

Blooming Prairie Public Utilities

Residential Customer Service Application

Name of Responsible Party _____

Service Address _____

Mailing Address _____

Phone Numbers: Home: _____ Cell: _____ Email: _____

Social Security # _____ Date of Birth _____

Employer's Name & Phone No. _____

Alternate Contact in Case of Emergency _____

2nd Responsible Party (if desired):

Name: _____

Phone Numbers: Home: _____ Cell: _____ Email: _____

Social Security # _____ Date of Birth _____

Employer's Name & Phone No. _____

Name/Locaton of Previous Utility _____

If Residential Customer, are you: Renting * _____ Buying Contract for Deed * _____ Owner _____

If Renting or Contract for Deed, Name of Homeowner _____

*A copy of your utility bill may be given to your landlord, along with any delinquent notices. Initial Here: _____

Requested Connection Date: _____

Photo ID is required at the time of this application (either MN Driver's License or MN ID Card)

By signing, I acknowledge that the above information is accurate, that I have been given a copy of the Utilities' Billing Policy, Notice of Privacy Practices, Tennessen Warning, and that permission is hereby granted to obtain account information from my former utilities.

***I understand that by signing this contract, I waive my rights under the Minnesota Government Data Practices Act, allowing BPPU to notify my landlord (if renting or CFD) of any pending disconnection notices.**

Please sign and date below (if two names are to be listed on the account, both parties must sign).

SIGNATURE (1) _____ **Date:** _____

SIGNATURE (2) _____ **Date:** _____