

City of Grove City
PO Box 98, 210 Atlantic Avenue West
Grove City, MN 56243
320-857-2322 Phone
mail@grovecitymn.com

Application for Service / Change of Service

APPLICANT COMPLETE THIS SECTION (please print):

Name: _____
Last First Middle

Old Address: _____
PO Box / Street City State Zip

New Physical Address: _____
Street Apt. Name Apt. #

Mailing Address (if different from physical address): _____

Telephone: _____
home work Social Security #

Date Service Requested: _____ mo/day/yr Number of Persons living in household: _____

Names of persons living in household: _____
Applicant Signature Date

_____ Date of Birth

Payments are due by the 15th of the month

\$150.00 DEPOSIT REQUIRED

RED FLAG RULE

APPLICANT COMPLETE THIS SECTION (please print):

As part of the FTC's Red Flag Rules that went into effect at Grove City Electric, we are required to verify every member's identity and make sure their name is listed on the electric account before divulging any information about the account. If you would like to allow someone other than your self have access to the information contained in your account, they must be listed and approved by you, the account holder prior to any information being shared.

Name: _____
Last First Middle

Address: _____
PO Box / Street City State Zip

Telephone: _____
home work

Name: _____
Last First Middle

Address: _____
PO Box / Street City State Zip

Telephone: _____
home work

I certify as the account holder and responsible party of this account that the above persons listed may have access to the information regarding my account in relationship to account balances, account usage or changes and other basic information. Under no circumstances will my social security number ever be shared even with the authorized persons.

_____ Applicant Signature Date

Third Party Notice

APPLICANT COMPLETE THIS SECTION (please print):

The purpose of the program is to notify a third party and the customer that a Notice of Disconnection has been sent. A third party could be a friend, relative, church or community agency. The third party is able to receive and give information about the customer and make a payment plan with Grove City Electric for the customer. This avoids the hardship that would result from service being shut off. Grove City Electric will make every effort to send a copy of the Notice of Disconnection to the party specified. The customer making the request understands that the electric utility is not liable should the third party fail to receive or act upon the notice.

I give my permission to Grove City Electric to provide information and accept information from the party named _____ below.

Applicant Signature Date

Name of Third Party to Be Notified

Name: _____
Last
First
Middle

Address: _____
PO Box / Street
City
State
Zip

Telephone: _____
home
work

Third Party Signature Date

This request cannot be accepted without the Third Party's signature.

CITY OFFICE (to be completed by Grove City)

IS CUSTOMER:	READ IN:	READ OUT:
<input type="radio"/> Owner	<input type="radio"/> New Customer	<input type="radio"/> Moving out of City
<input type="radio"/> Renter	<input type="radio"/> Existing Customer relocating	<input type="radio"/> Existing Customer relocating
List Owner: _____	w/in City	w/in City

Does Property have Electric Heat ? Yes No Comments: _____

Disconnect Services (can only be requested by property owner)

Circle services to be disconnected: Electric Water Sewer

Deposit Paid: \$ _____ Assigned Acct. #: _____

Deposit on File: \$ _____ No Deposit Required (Reason: _____)

Initials of individual taking application.

UTILITY DEPARTMENT

Date Service : Read _____ <small>mo/day/yr</small>	Meter Readings		Meter Serial #
	Read -in	Read-out	
<i>Address to Read:</i> Street Address: _____ Apartment Name: _____ Apartment #: _____	Electric # 1		
	Electric # 2		
	Water # 1		
	Water # 2		
	Other		
	Signature		

(Service person) (Service person) (Service person)