CITY OF UNALASKA

P.O. BOX 610 UNALASKA, ALASKA 99685-0610 (907) 581-1251 FAX (907) 581-3102

CHANGE IN UTILITY SERVICE

| | | CHAN | GE IN OTIL | III SERVICE | |
|---|--|---|-----------------------------------|------------------------|--|
| REQUESTED AC | TION | | | | |
| □ Connect Servic□ Disconnect Ser | | | | | |
| If you are requesting | ng a connection or disconnect | ion, please indicate the | type of service(| (s): | |
| □ Electric□ Landfill | □ Water□ Wastewater | | | | |
| CUSTOMER INFO | RMATION | | | | |
| Name | | Phone Number | E-mail | | |
| Mailing Address | | City | State | Zip | |
| Physical Address of Util | ity Service | | Effective Date | | |
| Billing and Payment P consumer in person or address furnished by th the bills. |) BILLING PROCEDURES AND C rocedures. Bills shall be deemed when deposited in the United St e consumer. Bills will be sent on a | d rendered, and other notic ates mail and directed to the a monthly basis and are due | e consumer at the | eir last known mailing | |
| Change in Occupancy. notice of the change sh |) BILLING PROCEDURES AND Co When a change of occupancy or co all be given to the City's Finance esponsible for all service supplied | of ownership takes place on a Department at least five (5) | business days pri | or to the change. The | |
| | POSITS FOR UTILITY SERVICE seeking to receive utility services ervice. | s from the City shall pay to | the City a billing | deposit prior to the | |
| SIGNATURE | | FOR (| FOR OFFICIAL USE ONLY | | |
| Customer Signature | | Date sent to DPW Deposit on File? | Date sent to DPW Deposit on File? | | |
| Date | | New Deposit Calc Deposit Refund D Anticipated Refund | ate | | |