BOROUGH OF WAMPUM PO BOX 65 WAMPUM, PA 16157 (724) 535-8241

APPLICATION FOR ELECTRIC/WATER METER INSTALLATION

NAME:	DATE:
INSTALLATION	DITE
ADDRESS:	
MAILING	
ADDRESS:	
NAME OF LANDLORD IF APP	LICABLE:
ADDRESS OF FORMER PLACE	E OF RESIDENCE
EMPLOYMENT	"
PHONE NUMBER CELL PHONE NO	•
CELL PHONE NO.	· ·
NAME OF LAST UTILITY COM	MPANY:
ADDRESS	
SIGNATURE (MR)(MRS)	
FOR OF	FICE USE ONLY
PERMIT GRANTED	DEPOSIT PAID
PERMIT DENIED	DATE
ELECTRIC METER NO.	
WATER METER NO	
I.D. NO	, ACCT. NO
AUTHORIZED	
SIGNATURE	