

**City of Hastings**  
COUNTY OF BARRY, STATE OF MICHIGAN

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**Utility Billing Request for New Account**

Requested Effective Date: \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Account Number: \_\_\_\_\_

**Meter Information:**

**Customer Information:**

**Owner      Renter**

Customer Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
  
Landlord Name: \_\_\_\_\_

**Picture Identification Required:**

Type of ID: \_\_\_\_\_  
Verified By: \_\_\_\_\_ Date: \_\_\_\_\_

**CERTIFICATION:**

I certify that all information contained in this form is

**Utility Billing Request for Account Termination**

Requested Effective Date: \_\_\_\_\_  
Account Number: \_\_\_\_\_

**Meter Information:**

Meter types:    Water    Sprinkler    Sewer    Deduct  
Meter ID: \_\_\_\_\_ Meter ID: \_\_\_\_\_

**Service is currently:    OFF    ON**

**Customer Information:**

Customer Name: \_\_\_\_\_  
  
Forwarding Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Final Requested By: \_\_\_\_\_  
Incoming \_\_\_\_\_ Outgoing \_\_\_\_\_  
Owner \_\_\_\_\_ Renter \_\_\_\_\_

**Turn Service Off:    YES    NO**

NOTES: \_\_\_\_\_

true and complete.

**Customer Signature:** \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Appointment Reason: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_