

City of Canton

Application for Utility Service—Residential

Submit at Canton City Hall (in person or in drop slot), email to cantontcityclerk@centurytel.net, Fax to 573-288-3738, or mail to PO Box 231, Canton MO 63435. \$75 deposit can be paid through "Pay Your Bill" link at showmecanton.com (use account #7777) in addition to cash, check, or card options at Canton City Hall.

Name _____ Service Address _____

SSN _____ Apt or Lot # _____

Date of Birth _____ Mailing Address _____

Phone # _____ Email Address: _____

Employer _____

Employer Phone _____ Own _____ or Rent _____

Landlord's Name _____ Phone # _____

Name of Spouse (or Additional Responsible Party) _____

Date of Birth _____ SSN _____

Spouse/ Responsible Party Employer _____

Spouse/ Responsible Party Employer Phone Number _____

Number of Occupant(s) _____ Names of Persons living in the residence (18 yrs. or older)

Emergency Contact Name & Phone Number _____

I hereby apply for utility services with the City of Canton and agree to comply with all ordinances, rules and regulations as prescribed by the City of Canton. I hereby declare that all information I have listed above is true and correct to the best of my knowledge. Should any information stand to be false, I understand that my services shall and will be interrupted immediately. Unpaid balances will be turned over to a collection agency. I agree to permit the City of Canton and their business associates to contact me, and all other responsible parties on my account, on our cell phone or other mobile devices concerning any and all aspects of my account.

Applicant's Signature _____ Spouse/Additional Responsible Party _____ Date _____

(Official use only)

Remember to get:

1. Picture I.D. for both responsible parties
2. Social Security Numbers for both responsible parties
3. \$75.00 Deposit Paid in Full _____ Payment Agreement _____ \$25. Transfer Fee _____
4. Fill out work order. **SOMEONE MUST BE THERE AT CONNECTION!!!!**
HOURS OF CONNECTION ARE 8AM-11:30 AM & 12PM – 4PM