Application for City Services

Please print and fill in the following completely as possible

☐ Residential ☐ Commercial

_____ _____
Name on Account Name of Business (DBA)

_____
Physical Address

_____ _____ _____
Mailing Address City, State Zip

_____ _____ _____
Home Phone Cell Phone Driver's License #

_____ _____ _____
SS # or TIN Date of Birth Email Address

_____ _____
Place of Employment Work Phone

_____ _____ _____
Spouse's Name Spouse's DL # Spouse's SS #

_____ _____
Emergency Contact Name Emergency Contact Phone #

_____ _____ _____
Last Service Address City, State Zip

_____
Name(s) of children living in the household

☐ Check to add $1.00 per month to the Citizens Assistance Program (CAP)

Customer's Signature: _____

Today's date: _____ Service start date: _____

Services available are determined by the physical address. Services the City of Dumas provide: gas, water, sewer and refuse.