

Order _____

Bad Debt _____

Citizens Gas Fuel Company Application for Residential Service

CD

MO

MS

Start Date: _____

Customer#: _____

Property #: _____

Name: _____ SS# _____

Spouse: _____ SS# _____

Others on Lease: _____ SS# _____

Requests Citizens Gas Fuel Company to provide gas service at

Service Address: _____

Mailing Address: _____

E-Mail Address: _____

And upon request, to any other address where Citizens Gas Fuel Company provides service.

As a customer, I agree to pay Citizens Gas Fuel Company for gas service supplied according to the Company's rates, terms, rules and regulations. I further agree to abide by the terms and conditions of gas service as set forth in the rules, regulations and rates of Citizens Gas Fuel Company as in effect from time to time and placed on file with the Michigan Public Service Commission.

Customer Signature _____ **Date:** _____

Do you have a dog/dogs? Y or N **If so, name or names:**

Form of Verification:
Drivers License # _____

Birth Certificate _____ State ID _____ SS# _____

Home Phone #: _____ **Cell Phone #:** _____

Do you? **Own** **Rent** **Landlord Name:** _____

This application is not binding until initialed on behalf of the Company.

CSR Initials: _____

Comments: _____

Citizens Gas Fuel Company • 127 North Main Street • Adrian, MI 49221
517-265-2144 • 517-264-4401 fax

****CONFIDENTIAL****