

## Service Application

To request service, please fill out the form below. DO NOT USE THIS FORM if you have emergencies or questions regarding a **Gas Odor** or **Carbon Monoxide**. Instead, please call us immediately at **1-270-547-2455** or **1-270-877-2661**.

Account Number \_\_\_\_\_ Reference \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Service Problem \_\_\_\_\_

\_\_\_ I understand by submitting this form, I am applying for new residential service. I also understand that submitting this application is as legally binding as signing and submitting a normal paper application with my signature.

\_\_\_\_\_

Your name above.