



# Department of Public Utilities Renter Deposit Form

Date: \_\_\_\_\_ Phone Number \_\_\_\_\_

Name: \_\_\_\_\_

Address of Property: \_\_\_\_\_

Utility Account Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

(If different from Address of Property)

City, State, Zip Code: \_\_\_\_\_

Owner of Property: \_\_\_\_\_

Signature of Utility Customer \_\_\_\_\_

## **To be filled out by Department of Public Utilities:**

Water Deposit (\$100.00) Cash: \_\_\_\_\_ Check # \_\_\_\_\_

Sewer Deposit (\$100.00) Cash: \_\_\_\_\_ Check # \_\_\_\_\_

Director of Public Utilities \_\_\_\_\_

## **Refund:**

Date refunded: \_\_\_\_\_ Check Number: \_\_\_\_\_

Fund Account Number: 057-200-2214