

FOLEY OFFICE

413 EAST LAUREL AVENUE FOLEY, AL 36535 251-943-5001

DAPHNE OFFICE

700 WHISPERING PINES ROAD DAPHNE, AL 36526 251-626-5000

REQUEST FOR RESIDENTIAL SERVICE

PRIMARY CUSTOMER INFORMATION

Customer Name: Social Security Number: Driver's License State: Customer Phone Number: Email: Driver's License Number: SECONDARY CUSTOMER INFORMATION	
Driver's License State: Driver's License Number:	
SECONDARY CUSTOMER INFORMATION	
Secondary Name: Secondary Phone Number:	
Secondary's Social Security Number: Email:	
Driver's License State: Driver's License Number:	
Starting Date of Service: Rent or own?	
A ONE-TIME \$25 APPLICATION PROCESSING FEE WILL BE BILLED ON YOUR FIRST BILL. DEPOSIT N	MAY BE REQUIRED.
Please select one option:	
RUN CREDIT CHECK I WILL PAY DEPOSIT	
TON ORLOR TWILL FAT BET GOT	
SERVICE ADDRESS: BILLING ADDRESS:	IF SAME AS SERVICE
Street: Street:	
City & State:	
Zip Code: Zip Code:	
By signing this service request, customer agrees to the rules and regulations set forth by the Boar Rules and regulations available upon request)	d of Riviera Utilities.
Primary Signature: Date:	
Secondary Signature: Date:	