

Foley Office: 413 E Laurel Ave. Foley, AL 36535 (251) 943-5001 Fax (251) 970-4182

Daphne Office:

700 Whispering Pines Road Daphne, AL 36526 (251) 626-5000 Fax (251) 626-5993

Request for Residential Service

Primary Customer Name:		
Social Security Number and Driv	ver's License info: Customer Service	vill contact you for this information
Phone:	Email Address:	
Second Responsible Party Name:	:	
Relationship to Primary:		
Social Security Number and Driv	ver's License info: Customer Service	vill contact you for this information
Phone:	Email Address:	
Start Date of Service:	Rent or O	wn:
A one-time \$2	25 application processing fee w Deposits may be r	ill be billed on your first statement equired
	Please check	one
	Run Credit Check	Pay Deposit
Service Address:		Billing Statement Address
By signing this service request, th	he customer agrees to the rules and r	egulations set forth by the Board of Riviera Utilities.
(Rules and regulations available up	on request)	
Primary Customer Signature		econd Responsible Party Signature

Serving South Baldwin County Since 1916

Please fax, mail, or return in person to the appropriate office location.