

## **Application for Residential Service**

09/24

A security deposit may be required at time application is completed, as well as copy of driver's license and lease/proof of ownership.

Last Name	First Name	M.I.	Home Phone No.	Cell Phone No.	
What other names have yo	u used?				
Social Security Number	State I.D. or Driver's License Number		er Census Nu	Census Number (if applicable)	
Spouse or Second Party's N	ame		Soci	al Security Number	
Mailing Address	City		State	State Zip Code	
Email Address					
Employer	Mailing Address		Wo	Work Phone Number	
Physical Address of Locatio	n to be Connected		Account Number	or Previous Tenant	
Do you:	Structure Type	2:	Rural Ac	counts:	
Own	☐ House		Color of S	Structure	
Rent	☐ Apartment	1/84 1:1 11	<u> </u>		
☐ Lease	☐ Well	red/Mobile Home	Color of F	ROOT	
☐ Buying	☐ Well				
Directions for Rural Servi  The undersigned hereby  assumes full responsible  fees, if any. A copy of the	/ acknowledges red lity for prompt pay	uest for electrica	al service as stated s they become du	e and collection	
Signature				Date	

**Headquarters:** 1821 Clif Lear Ave. / PO Box 1087 / Grants, New Mexico 87020 **District Office:** 2500 NM Highway 602 / PO Box 768 / Gallup, New Mexico 87305