

1025 P Street P.O. Box 687, Gering, NE 69341

(308) 436-5096 www.gering.org

| | | RECEIVED BY: | | | |
|--|--------------------|--|--------|-------------------|-------|
| | | | | DATE RECE | IVED: |
| ☐ COPY OF LEASE OR OWN | NERSHIP IS REQUIRE | D | | | |
| PLEASE CHECK: | | | | | |
| | ☐ RESIDENTIAL | □MOV | /E INI | □ RENT | |
| | | | | | |
| | | | | □SOLD | |
| START DATE: | | | | | |
| NAME: | | | | PHONE NUMBER: _ | |
| | | | ALT | . PHONE NUMBER: _ | |
| ADDRESS: | | | | | |
| CITY, STATE, ZIP: | | | | | |
| MAILING / FWD ADDRESS: | | | | | |
| CITY / STATE / ZIP: | | CIL | YOA | | |
| EMAIL: | | | | | |
| ☐ PLEASE CHECK IF YOU W | | N TO E-BILL | | | |
| SS# / TAX ID#: | | | 5.47 | | |
| SS# / TAX ID#: | | | DAII | E OF BIRTH: | |
| □ COPY OF DRIVER'S LICENSE OR PHOTO ID REQUIRED | | | | | |
| ADDITIONAL AUTHOR | IZED PERSON(S): | | | | |
| , as a manufacture of the manufa | | | | | |
| (For Account Informati | ion Only) | | | | |
| | | | | | |
| SIGNATURE: | | | | DATE: | |
| ******* | ******* | ****** | ***** | 3/ | |
| OFFICE USE ONLY: | | OF | RIN, | | |
| PREVIOUS ACCOUNT # | | | | | |
| NEW ACCOUNT # | | | | | |
| DEPOSIT: | | □CASH | □CHECK | □CARD | |
| DL. 0011. | | _0/.011 | | | |
| RESIDENTIAL DEPOSIT: \$125.00 Flectric | | COMMERCIAL DEPOSIT: \$250.00 Flectric | | | |

DEPOSITS ARE NON-TRANSFERABLE & WILL BE APPLIED TO FINAL BILL

\$50.00 Water

\$50.00 Water