



(PART A) UTILITY DEPOSIT TRANSFER
THIS SECTION TO BE COMPLETED BY THE CURRENT CUSTOMER

One form of identification is required, must be a photo I.D.

Current name on account _____

Address _____ Phone _____

I hereby relinquish my utility deposit and transfer it to _____

Signature

Date

(PART B) THIS SECTION TO BE COMPLETED BY THE NEW CUSTOMER

One form of identification is required, must be a photo I.D.

Legal Name First _____ MI _____ Last _____

Service Address _____

Billing Address, if different _____

City _____ State _____ Zip _____ Date of Birth _____

Home Phone _____ Work Phone _____ Cell Phone _____

Your Social Security# _____ Your DL _____ State _____

Spouse/Roommate/Partner Legal Name _____

Their Work Phone _____ Their Cell Phone _____

Their Social Security # _____

Emergency Contact Name _____

Prior Yukon Addresses _____

Own Home _____ Rent Home _____ Landlord Name _____ Their Phone _____

I hereby certify that this information is truthful and accurate. I understand that a transfer deposit fee will be added to my first monthly bill. I further understand that failure to pay my bill will result in my service being disconnected and my account will be turned to a collection agency if I do not pay my final bill. I will be responsible for any additional collection fees, charges and/or legal fees incurred in the collection of the debt.

Signature _____

Date _____