Residential
New Account

City of Baker Consolidated Utility System

3325 Groom Road Baker, LA 70714 Ofc: (225)775-9952 Fax: (225)775-9615

	Date Applied:
Resident Name:	DL#:
Service Address:	Ph#:
Social Security #His:	Social SecurityHers:
DOB (His):	DOB (Hers):
Spouses Name:	DL#:
Home Phone:	Cell Phone:
Employed By (His):	Wk Ph#:
(Hers):	Wk Ph#:
Buying: Renting:	
===	Ph#:
	Business Ph #:
Deposit Receipt #:	Amount: \$
such subsequent locations as requand ordinances governing Baker services provided. I acknowledge that in order for se service to be connected. We can services must be connected after 3 It is understood that a delinquent not paid by the date and time, a \$5	furnished by Baker Consolidated Utilities at the address stated above, or nested. This application is made subject to the current rules, regulations Consolidated Utilities. I agree to pay established rates and charges for all rvices to be connected, an adult 21 years of age or older must be present for schedule connection Monday through Friday between 12:30 to 3:00 p.m. If :00 p.m., there is a \$20.00 call out charge. date and time will be listed on my billing statement. If the billed amount is 55.00 penalty will be assessed to my account. I also acknowledge that if my a-payment of a past due bill, I will be required to pay the balance of the
	Date: rical service is needed, please go to the Inspection

Department with deposit receipt, located downstairs in this building.

All penalty fees are subject to change.