



All non-residential accounts must submit a completed and signed UDOCC and a completed property inspection from the City of Wilson Planning Department and pass a fire inspection by the City of Wilson Fire Department prior to establishing utility services. Proof of lawful occupancy (lease agreement, rent receipt, Offer to Purchase and Contract, deed or current tax bill specifying the address), proof of business organization (Articles of Incorporation/Organization) a Federal Tax I.D. and a signature by an authorized representative of the business entity are required for utility services to be connected. For a business not operated by a recognized legal entity, application by a Responsible Party is required. A Standard Commercial Deposit of the average of two months of services at the location will be required. The request date for connection must be Monday-Friday during business hours. A service charge for the connection of utilities will be added to the first month's bill.

APPLICANT INFO **SERVICE REQUESTED**
Electric Gas Water Sprinkler Light Unit

Applicant's Legal Name: _____ Requested Date of Connection: _____

Service Address to Connect: _____

Mailing Address (if different): _____

Business' Federal Tax ID: _____ Applicant Phone: _____

Name of Responsible Party: _____ Relationship: _____

Driver's License State/Number: _____ *Applicant SS #: _____

Phone: _____ Moving From: _____ Disconnect Date: _____

Billing Preferences

Enroll me in E-Notification: Receive my monthly bill by an email address. Email Address: _____

*The Social Security number is recommended, but not required. Failure to submit a Social Security number will require a Maximum Deposit.

DEPOSIT INFO

A deposit for utility services is collected as security so all bills will be paid in full by their due date. Businesses requesting utility services may:

- A. Pay an initial Cash Deposit (The standard is 2 months' average bill); or
- B. Provide a Responsible Party who has Good Credit with the City of Wilson.

Refund of Deposits

- 1) A deposit will be refunded promptly and automatically when service is voluntarily discontinued and all bills are paid. All outstanding amounts on the final bill will be deducted from the deposit amount.
- 2) The City will promptly return the Responsible Party's deposit when the account exhibits good credit. The Responsible Party may request this refund after good credit has been established.

*Good Credit is defined as not more than 2 delinquencies, no returned checks/fraudulent credit card transactions, and no disconnections in the most recent 12-month period.

PAYMENT OPTION

The City of Wilson offers its customer a more convenient, timely form of payment via Automatic Bank Draft Program from a checking account. The customer's monthly bill will be drafted from the customer's account on their due date, except for when the date falls on a date that either the bank or the City of Wilson is closed, in which case your account will be drafted the next business day.

Enroll my account in Bank Draft**

** To enroll in Bank Draft, we will need a voided check at the time of enrollment.

The undersigned does hereby make application for Utilities services indicated at the above address and agrees to observe the rules and regulations of Wilson Energy. Service applicant is the owner of the premises being served, or if a leased property or residence, the service applicant has secured any and all approvals required by the property owner or its representative for a service connection. Any false information given on this application will be grounds for refusal of service rendered or disconnection of instated services. All uncollectible debts are transferred to an outside Collection Agency for collection. Utility services will be subject to any and all rates, rules, regulations, policies, procedures, terms and conditions applicable to the service, and as revised by the City with the authority given by the North Carolina General Statue 160A, Article 16.

Signature of Person Requesting Connection of Utilities Services: _____

OFFICE USE ONLY

Customer ID/Location #: _____ Old Customer ID/Location #: _____

Deposit Required: _____ Transfer Deposit - Account#: _____

Bill Cycle/Route Information: _____ Bill Due Date _____ Additional Fees _____