

*City of Humble - Utility Billing*

Application for Commercial Service

114 W. Higgins – Humble, TX 77338

(281) 446-3061

Date: \_\_\_\_\_

Effective Date: \_\_\_\_\_

Service Address: \_\_\_\_\_

\_\_\_\_\_

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Fax #: \_\_\_\_\_

Email Address: \_\_\_\_\_ Tax ID #: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_ Expires: \_\_\_\_\_

Person to contact in case of Emergency:

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Have you ever had service with us? YES \_\_\_\_\_ NO \_\_\_\_\_

If YES please give previous address: \_\_\_\_\_

I, the undersigned, fully understand that I am liable for any and all water utility bills that may become due to the City of Humble at this service address and that any information on this application, including cell phone numbers, may be used in the effort to collect any monies due to the City of Humble on this account.

\_\_\_\_\_  
Signature of Responsible Party Date

Type of Business: \_\_Restaurant \_\_Day Care \_\_Hair Salon \_\_Retail \_\_Office \_\_Strip Center \_\_\_\_\_#of units

\_\_Other (specify) \_\_\_\_\_

Deposit Amount: \_\_\_\_\_ Account #: \_\_\_\_\_

Application Fee: \_\_\_\_\_ Meter #: \_\_\_\_\_