

TOWN OF TRAFALGAR  
WATER & SEWER UTILITY

**APPLICATION FOR**  
**MORTGAGE / REALTY COMPANIES**

All information must be completed

Date \_\_\_\_\_ Date of Possession \_\_\_\_\_

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

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

*(if different from above)*

Business Name: \_\_\_\_\_

DBA Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Business Fax #: \_\_\_\_\_ Business E-mail: \_\_\_\_\_

SS # / Tax ID # \_\_\_\_\_

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

Phone # \_\_\_\_\_ E-mail: \_\_\_\_\_

Have you ever had service in Trafalgar before? \_\_\_\_\_

If yes, list address: \_\_\_\_\_

*By signing below, I verify that the above information is correct to the best of my knowledge and agree that, if I am a customer of the Town of Trafalgar Utility, this application and/or information contained herein may be shared with the Town of Trafalgar.*

\_\_\_\_\_  
Representative's Signature of Mortgage/Realtor Co.

Date \_\_\_\_\_

\_\_\_\_\_  
Representative's Signature of Mortgage/Realtor Co.

Date \_\_\_\_\_

Town of Trafalgar Representative: \_\_\_\_\_

Deposit: Yes \_\_\_ No \_\_\_ Amount \$ \_\_\_\_\_ Cash \_\_\_ Check # \_\_\_