

**BURNS FLAT  
UTILITIES AUTHORITY**

BURNS FLAT UTILITIES AUTHORITY  
P. O. BOX 410  
222 HIGHWAY 44  
BURNS FLAT, OK 73624

Phone: 580-562-3144  
Fax: 580-562-3146  
E-mail: info@burnsflatok.com

**SERVICE CONTRACT**

NAME: \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

**CONFIDENTIAL INFORMATION**

HOME OR CELL PHONE NUMBER: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

SPOUSE OR EMERGENCY CONTACT NAME: \_\_\_\_\_

SPOUSE OR EMERGENCY CONTACT PHONE NUMBER: \_\_\_\_\_

YOUR EMPLOYER OR SPOUSE EMPLOYER : \_\_\_\_\_

I have received and read a copy of the Burns Flat Utilities Authority billing policy and understand that I am liable for all monies due to the Authority in accordance with such policy.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_

**OFFICE USE ONLY**

ACCOUNT NUMBER: \_\_\_\_\_ RECEIVED BY- INITIAL : \_\_\_\_\_

\_\_\_ ADDED WATER CONNECT FEE \_\_\_ EMS ASSESSMENT FEE (ADD OR MAKE SURE IT'S TURNED ON, OFF FOR MODA)

\_\_\_ SEWER (RESI OR COMM? CHECK FOR DUPLICATES? SPECIAL SEWER FOR 2 METERS?)

\_\_\_ TRASH CHARGES (CHECK FOR DUPLICATES? NO 2ND CART FOR MODA)

\_\_\_ # OF CARTS CURRENTLY ON SITE? \_\_\_ #OF CARTS WANTED? (MAXIMUM OF 2 CARTS)

\_\_\_ SERVICE ORDER TO REPUBLIC FOR: **PICK UP OR DELIVERY**

\_\_\_ SERVICE ORDER TO REPUBLIC FOR: **ADD TO BILLING, REMOVE FROM BILLING**

\_\_\_ REPUBLIC ALREADY BILLING FOR 1 OR 2 CARTS?

\_\_\_ PUT ACCT. ON HOLD IF 20TH OF MONTH OR LATER

\_\_\_ END HOLD DATE-1ST DAY OF THE NEW MONTH