



CITY OF LAS VEGAS

P.O. BOX 160 • 1700 N. GRAND AVE. • LAS VEGAS, NEW MEXICO 87701-0160 • 505-454-1401 • FAX: 454-7335

FINANCE DEPARTMENT

DRIVER LICENSE NUMBER # _____

STATE ISSUED _____

SOCIAL SECURITY NUMBER # _____

ACCOUNT # _____ DATE _____ DOB _____

NAME _____ PHONE _____

EMPLOYER _____ WORK PHONE _____

SPOUSE _____ SOCIAL SECURITY # _____

SERVICE ADDRESS _____

MAILING ADDRESS _____

PERMANENT ADDRESS _____

SERVICES

TYPE OF HUSING

GAS _____ WATER _____ SANITATION _____ SEWER _____

HOMEOWNER _____ RENTAL _____

LANDLORD'S NAME _____

LANDLORD ADDRESS _____

NAME OF NEAREST RELATIVE _____

NEAREST RELATIVE ADDRESS _____

CUSTOMER'S SIGNATURE _____

RECEIPT NUMBER _____

WATER DEPOSIT _____ GAS DEPOSIT _____

WATER PROC FEE _____ GAS PROC FEE _____

TRANSFER DEPOSIT TO A NEW ADDRESS YES _____ NO _____

IF YES: NEW ADDRESS _____ ACCOUNT # _____

IN NO: FORWARDING ADDRESS _____

DAY OF SERVICE REQUESTED OFF _____

CUSTOMER'S SIGNATURE _____ DATE _____