

# Utility Application

## Commercial



Town of Middletown  
19 West Green Street  
Middletown, DE 19709  
(302) 378-2711  
www.middletownde.org

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

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

Contact Name and Phone #: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Fed ID # \_\_\_\_\_

Landlord's Name and #: \_\_\_\_\_

Landlord's Mailing Address: \_\_\_\_\_

**\*Please initial each box after reading:**

- I understand that bills are mailed out the 15th of every month and are due by the last business day of that month.
- I understand that when my bill reaches 7 days past due I will be charged a \$5.00 late fee.
- I understand that postmarks on payments will not be accepted.
- I understand that my service will be disconnected without further notice unless payment is received.
- I understand that if my electric service is disconnected due to nonpayment, I will be charged a \$35 reconnection fee.
- I understand that all checks returned to the Mayor and Council of Middletown will be assessed a \$50 returned check fee and customers who do not make payment in full will be subject to disconnection in 5 days. Returned checks including fee must be paid with cash or money order.
- I understand that two returned checks within one year, will result in my account becoming a cash only account. Payments in the form of cash, money order, or debit will be accepted for one year.
- I understand that if a check is returned that was used to pay for reconnection, electric service will be disconnected without notice.
- I give permission to the Town of Middletown to take the actions needed to locate me if I leave a bill unpaid.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**By signing above, I agree to make payment for all services rendered by the Mayor and Council of Middletown and understand the policies stated above.**

Office Use Only:  
Payment

Received by:

Photo Id Checked