Town of Burgaw
Application for Utilities
BUSINESS

Town of Burgaw, NC
109 North Walker Street
Burgaw, NC 28425
(910)259-2151
Fax: (910) 259-6644
customer.service@burgawnc.gov

☐ **I am interested in signing up for Automatic Draft**
(Please fill out Automatic Draft Authorization form)

☐ **I want to sign up for paperless billing**
(Email provided below will be used)

Service Address: _____

Business Name: _____

Business Tax Identification Number: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone: _____ Fax: _____

E-Bill Email: _____ Square Footage of Building: _____

Type of Business: _____

Business Owner Name: _____

Home Phone: _____ Cell Phone: _____

Date of Birth: _____ *Race: _____ **Social Security #: _____

Driver's License #: _____ State Issued: _____

Contact Person for Utility Issues: _____ Title: _____

Contact Person Phone: _____

Contact Person for Billing Inquires: _____ Title: _____

Contact Person Phone: _____

** Race information is required to be gathered by federal law in order to ensure compliance that services are provided to any and all people regardless of race, color, natural origin, sex, age and/or disabilities.*

*** The social security number is collected from any person who may become a debtor for purposes of Setoff Debt Collection, G.S. 105A-3(c). The information may be used for collection.*

All utility bills are due by the 10th of the month. We do allow a grace period in which you can pay your bill by 5:00 PM on the 15th. If we have not received your payment in Town Hall by 5:00 PM on the 15th, a $35.00 administrative fee is imposed on all delinquent accounts. Administrative fees and past due balances must be paid in full before the 21st day of the month to avoid disconnection of service. I have read this agreement, and I agree to these terms.

Signature: _____ Date: _____

OFFICE USE ONLY

Account #_____ Deposit $_____ Turn On: _____

Reading: _____ Serial # _____ Endpoint # _____