



# Frankfort Plant Board

## New Customer Information Sheet

Customer/Business Name: \_\_\_\_\_

Social Security Number/Tax ID Number: \_\_\_\_\_

Mothers Maiden Name (Residential Customers Only): \_\_\_\_\_

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

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

Services Needed (Check All That Apply):

Electric  Water  Cable  Internet  Phone

Service Activation Date: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Signature: \_\_\_\_\_

**Authorized users may be added to any FPB account.** Authorized users have access to make changes/additions and inquire about services/account balances. Please provide the name and Date of Birth (DOB) for authorized users.

Authorized User Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Authorized User Name: \_\_\_\_\_ DOB: \_\_\_\_\_

### Please include the following

**Residential:** A copy of your picture ID, and if renting, a copy of your lease agreement.

**Businesses:** A copy of the Business License or Article of Incorporation, a copy of your lease agreement. This form must be notarized to be considered as a form of ID.

The foregoing form was acknowledged and signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by

\_\_\_\_\_.

Notary Signature: \_\_\_\_\_

My commission Expires: \_\_\_\_\_