

Owner Application for Service

Last (4) SSN _____

Name: _____

Date: _____

Service Address: _____

Mailing Address (if different): _____

Home Phone: _____

Cell Phone: _____

Email(s): _____

At the rate and subject to Terms and Conditions as filed from time to time with the DPU of Massachusetts, I agree to abide by all rules and regulations of the Sterling Municipal Light Department. I further agree to grant free and easy access to said Department to read and maintain any equipment belonging to the Sterling Municipal Light Department.

I request power turned on (date): _____

Signature: _____

Account #: _____