



**APPLICATION FOR RESIDENTIAL SANITATION SERVICES**

PO Box 638, 305 N. Arch Street, Royse City, TX 75189

Phone: 972-636-2250

Fax: 972-635-2319

Email: utilities@roysecity.com

Notice: This application is a government record, as defined by the Texas penal code, Section 37.01. Making a false entry in a government record is a criminal offense. This form will not be considered a viable application for city utilities unless the form has been completed in it's entirety, every blank must be completed. All city utility accounts shall bear the name of the individual accepting the responsibility of the deposit and certificate of occupancy. This form must be signed and dated by the individual accepting the responsibility for the utility deposit an the certificate occupancy.

Service Request Date: \_\_\_\_\_ Account #: \_\_\_\_\_  
Applicant: \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Mailing Address (if different): \_\_\_\_\_  
DL#: \_\_\_\_\_ State: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Social Security #: \_\_\_\_\_ Tax ID# (if applicable): \_\_\_\_\_  
Cell #: \_\_\_\_\_ Alternate #: \_\_\_\_\_ Work#: \_\_\_\_\_  
Email: \_\_\_\_\_ Circle one: YES or NO to receive E-Bill paperless billing.

Co-Applicant: \_\_\_\_\_ Cell #: \_\_\_\_\_  
DL #: \_\_\_\_\_ State: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Social Security #: \_\_\_\_\_ Email: \_\_\_\_\_

**PROPERTY USE: Check One**

\_\_\_\_\_ Rent (Must provide copy of signed lease agreement.)  
Landlord's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_ Own (Must provide copy of signed closing documents.)  
\_\_\_\_\_ Mangement/Landlord Account

For corporation accounts, the following must be provided:

- 1. Copy of TAX ID certificate OR the IRS letter assigning the company the EIN #.  
The W-9 form is not accepted.
- 2. Proof of ownership or the property management agreement.

**SANITATION:**

Number of Trash Toters Needed: \_\_\_\_\_ Number of Recylce Bins: \_\_\_\_\_

Please note one (1) trash container and recycle bin is provided with the account at no additional charge. If you require additional trash containers a charge of \$4.20 per additional container will be added to your monthly bill.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Co-Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY:**

RELEASES: Oncor#: \_\_\_\_\_ F.E.C. emailed on: \_\_\_\_\_ Atmos#: \_\_\_\_\_

Inspection Date: \_\_\_\_\_ Time Frame: \_\_\_\_\_ Calendar \_\_\_\_\_ Comments

**CITY OF ROYSE CITY**  
**Account Privacy Agreement**

The City of Royse City is a government operated utility. Your account information is considered public record under the Texas Public Information Act.

The Texas Utility Code, Chapter 182.052 allows a customer's account information confidential except to:

- 1) An official or employee of the state, a political subdivision of the state, or the United States acting in an official capacity.
- 2) An employee of a utility acting in connection with the employee's duties.
- 3) A consumer reporting agency.
- 4) A contractor or subcontractor approved by and providing services to the utility, the state, a political subdivision of the state, or the United States.
- 5) A person for whom the customer has contractually waived confidentiality for personal information.
- 6) Another entity that provides water, wastewater, sewer, gas, garbage, electricity, or drainage service for compensation.

**AUTHORIZATION FOR CONFIDENTIALITY REQUEST:**

I understand my account information is considered public record and I have the right to request my personal account information and any information relating to the volume or units of utility usage or the amount billed to be kept confidential.

**PLEASE CHECK ONE:**

- I request my account information kept confidential with the exception of the authorize person(s) listed below.
- I authorize any and all account information to be released up on request.

You may rescind your request for confidentiality upon a written request to the Water Department.

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
Date

The following people are authorized to receive my account information:

Name	Relationship	Last 4-digits of phone number
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_____	_____	_____
_____	_____	_____
_____	_____	_____



The City of Royle City participates in the IRIS (Immediate Response Information System). This system allows the City to send mass notifications for both Emergency and Non-Emergency situations. It has the ability to broadcast notification through multiple forms of communication to hundreds of thousands of residents quickly. Please take a few minutes to provide the information requested below and return this form to the City of Royle City Utility Department located at 305 N. Arch Street. Thank you for your time and attention in this viable resource. All information contained herein shall remain confidential.

**CONTACTS & TELEPHONE NUMBERS**

Name	
Address	
Phone #1	Text Y/N
Phone #2	Text Y/N
Phone #3	
Email Address #1	
Email Address #2	
Sub-Division	
New or Update Info	
Date:	

Sec. 13.03.005 Emergency Notification Fee

An annual emergency notification fee not to exceed three dollars and fifty cents (\$3.50) shall be imposed on all utility accounts. (Ordinance 10-07-787 adopted 7/13/10)

\*\*\*OFFICE USE ONLY\*\*\*

Removed previous owner/renter

Change/Update user type

Entered Local ID and User type: Custom 1

## HOUSEWARMERS

DATE:	PHONE#
NAME:	EMAIL
ADDRESS:	INTERESTS?
SUBDIVISION:	COMMENTS?

We would like to come by and give you a **BIG** welcome to our Wonderful Town! Your gift bag will be personally delivered to your doorstep and be filled with valuable offers from local merchants and provide you with a Preferred medical/professional directory!

Questions?

Call Blair & Mary Johnson  
Franchise Owners  
Housewarmers of Royse City  
469-387-9620