

Poteau Public Works Authority  
Contract for Commercial Utilities

Name of business \_\_\_\_\_ # of employees \_\_\_\_\_

Type of business \_\_\_\_\_

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

Mailing address \_\_\_\_\_

Name of Property Owner \_\_\_\_\_

Business telephone # \_\_\_\_\_ Federal/ State Tax ID # \_\_\_\_\_

Contact person \_\_\_\_\_ Contact phone \_\_\_\_\_

Have you ever had service with the City of Poteau? YES/ NO If so, when? \_\_\_\_\_

What address & type of business \_\_\_\_\_

\_\_\_\_\_

*The undersigned hereby agrees to pay the established rates set forth by the City of Poteau ordinances, and agrees to the regulation of said services. This application becomes a contract upon the establishment of service.*

Applicant: \_\_\_\_\_ Signature Authorized Agent: \_\_\_\_\_ Signature

Office Use Only		
Beginning Date:	Work order #	End date: