



EASTON UTILITIES

Life. Made better.™

As your community-owned, not-for-profit Utility & Telecommunication Company, we look forward to serving you.

GENERAL INSTRUCTIONS: Please complete Sections A and B regardless of the request type. Additional documents may be necessary for any service request. Applicants should also contact the Town of Easton for additional requirements regarding New Utility services. This application may require copies of documents prepared by a registered design professional for New Electric, Gas, and Water Utility Service requests. The Customer Service Center at Easton Utilities can answer any questions regarding the completion of this application. Easton Utilities reserves the right to cancel this request if we do not receive further communication within 15 days of Easton Utilities' response date.

Please complete the liability waiver for new/upgrade requests for Electric and Gas services.

The service tariffs are part of every contract for utility service. All Utility service tariffs are available upon request or on our website.

A. TELL US ABOUT YOURSELF		<i>Business customers skip to section A1</i>	
<div style="display: flex; justify-content: space-between; margin-bottom: 10px;"><input type="checkbox"/> Property Owner<input type="checkbox"/> Tenant<input type="checkbox"/> Contractor<input type="checkbox"/> Developer<input type="checkbox"/> Other _____</div> <div style="display: flex; justify-content: space-between;"><div>First name _____</div><div>Middle Initial _____</div><div>Last name _____</div></div> <div style="display: flex; justify-content: space-between;"><div>Social Security Number or ITIN number _____</div><div>Date of birth (MM/DD/YYYY) _____</div></div> <div style="display: flex; justify-content: space-between;"><div>Co-Applicant _____</div><div>Relationship _____</div></div> <div style="display: flex; justify-content: space-between;"><div>Social Security Number or ITIN number _____</div><div>Date of birth (MM/DD/YYYY) _____</div></div> <div style="display: flex; justify-content: space-between;"><div>Current Easton Utilities customer? <input type="checkbox"/> Yes <input type="checkbox"/> No</div><div>If yes, Account Number _____</div></div>			
A1. BUSINESS INFORMATION			
<div style="display: flex; justify-content: space-between;"><div>Name of Business _____</div><div>Federal Tax Id _____</div></div> <div style="display: flex; justify-content: space-between;"><div>Contact Name _____</div><div>Title _____</div></div> <div style="display: flex; justify-content: space-between;"><div>Current Easton Utilities customer? <input type="checkbox"/> Yes <input type="checkbox"/> No</div><div>If yes, Account Number _____</div></div>			
B. CONTACT INFORMATION			
<div style="display: flex; justify-content: space-between;"><div>Service Location _____</div><div>Apt No. _____</div></div> <div style="display: flex; justify-content: space-between;"><div>Mailing Address _____</div><div>City _____</div><div>State _____</div><div>Zip Code _____</div></div> <div style="display: flex; justify-content: space-between;"><div>Contact#1 _____</div><div><input type="radio"/> Cell <input type="radio"/> Landline <input type="radio"/> Work <input type="radio"/> Business</div></div> <div style="display: flex; justify-content: space-between;"><div>Contact#2 _____</div><div><input type="radio"/> Cell <input type="radio"/> Landline <input type="radio"/> Work <input type="radio"/> Business</div></div> <div style="display: flex; justify-content: space-between;"><div>Fax# _____</div><div>E-mail _____</div></div>			

C. TYPE OF REQUEST	
C1. "I AM RENTING/ BUYING A PROPERTY " <i>Property Owner/ Tenant Only</i>	
Address to be serviced _____ Apt. No. _____ City _____ State _____ Zip Code _____ Effective start date (MM/DD/YYYY) Monday thru Friday only. Excluding Holidays _____ <i>Please provide a copy of your lease or proof of purchase. Names, Address, Signatures and Effective date must be clearly shown. Please fill section C2 if already an Easton Utilities customer and need to transfer previous address. A deposit may be required for any new services or transfer of service. An Easton Utilities representative will be in contact.</i>	
C2. "I NEED TO CANCEL UTILITY SERVICES " <i>Property Owner/ Tenant Only</i>	
Address to be serviced _____ Apt. No. _____ City _____ State _____ Zip Code _____ Effective cancel date (MM/DD/YYYY) Monday thru Friday only. Excluding Holidays _____ <i>If rental, Easton Utilities will contact Landlord to transfer services back. Please fill out section C3 if you currently have Cable/Internet/Phone services.</i>	
C3. "I WANT TO SIGN UP FOR OR CHANGE MY EXISTING CABLE, INTERNET OR PHONE SERVICES " <i>Property Owner/ Tenant Only</i>	
1. CABLE	
<input type="checkbox"/> Enrollment <input type="checkbox"/> Upgrade <input type="checkbox"/> Downgrade <input type="checkbox"/> Terminate specify date (MM/DD/YYYY) _____ Choose One <input type="checkbox"/> Basic <input type="checkbox"/> Tier 1 <input type="checkbox"/> Tier 2 <input type="checkbox"/> Tier 3 Options <input type="checkbox"/> HDTV <input type="checkbox"/> Español <input type="checkbox"/> Sports Tier <input type="checkbox"/> HBO <input type="checkbox"/> Showtime <input type="checkbox"/> Cinemax <input type="checkbox"/> Starz/Encore <input type="checkbox"/> The Movie Channel Number of cable boxes (a stream can be used instead of a cable box) _____ Number of streams on Roku, Firestick, Web Browser, Android or iOS mobile devices <input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 6 <input type="checkbox"/> 9 <input type="checkbox"/> 12 DVR package <input type="checkbox"/> 50G <input type="checkbox"/> 250G <input type="checkbox"/> 500G <input type="checkbox"/> 1T <input type="checkbox"/> Restart TV (gives you the ability to restart, fast forward, and rewind live tv) <input type="checkbox"/> Web access (allows you to watch content on a web browser)	
2. INTERNET	
<input type="checkbox"/> Enrollment <input type="checkbox"/> Upgrade <input type="checkbox"/> Downgrade <input type="checkbox"/> Terminate specify date (MM/DD/YYYY) _____ <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> Residential (download/upload speed) <input type="checkbox"/> Starter 25 mbps / 5 mbps <input type="checkbox"/> Value 125 mbps / 15 mbps <input type="checkbox"/> Value Plus 200 mbps / 20 mbps <input type="checkbox"/> Performance 350 mbps / 25 mbps <input type="checkbox"/> Ultimate 600 mbps / 50 mbps <input type="checkbox"/> Extreme 1000 mbps / 100 mbps </div> <div style="width: 48%;"> Commercial (download/upload speed) <input type="checkbox"/> Starter 25 mbps / 5 mbps <input type="checkbox"/> Value 125 mbps / 20 mbps <input type="checkbox"/> Value Plus 200 mbps / 30 mbps <input type="checkbox"/> Performance 350 mbps / 35 mbps <input type="checkbox"/> Ultimate 600 mbps / 75 mbps <input type="checkbox"/> Extreme 1000 mbps / 125 mbps </div> </div> E-mail #1 _____@goeaston.net Password _____ Email #2 _____@goeaston.net Password _____ Options <input type="checkbox"/> V-Fi Managed Wi-Fi	

Service includes equipment for up to one (1) wired connection. Wireless routers and additional e-mail addresses are available for an additional fee. Please contact Easton Utilities for more information, or visit EastonUtilities.com for details about each package offered. Any equipment provided by Easton Utilities will need to be returned to avoid equipment charges.

3. PHONE

☐ Enrollment ☐ Additional ☐ Terminate specify date (MM/DD/YYYY) _____

Line #1 ☐ Residential ☐ Business ☐ PBX (Private Branch Exchange) System ☐ Other _____ Transfer? ☐ YES ☐ NO

Line #1 ☐ Residential ☐ Business ☐ PBX (Private Branch Exchange) System ☐ Other _____ Transfer? ☐ YES ☐ NO

Please complete a copy of the 911 LOA available at EastonUtilities.com/Phone. Please provide a copy of bill from current phone company if transferring. Other restrictions may apply.

D. OTHER REQUESTS

I WANT TO...

☐ Add Direct Debit (Automatically Debit bill amount from Checking Account or Credit Card)

☐ Sign up for Paperless Billing (I want to stop receiving paper bills, and receive monthly digital notification via email)

Return completed application to Easton Utilities at:
201 N Washington Street
Easton, MD 21601
Phone: (410) 822-6110
Fax: (410) 822-4987
E-mail: info@eastonutilities.com

For Office Use Only

APPLICATION FOR ELECTRIC SERVICE ONLY	
C4.	TYPE OF REQUEST
1.	"I NEED TO..."
Property Owner/Contractor/Developer Only	
<div style="display: flex; justify-content: space-between;"> <input type="checkbox"/> Request new electrical service. <input type="checkbox"/> Upgrade my existing electrical service. <input type="checkbox"/> Relocate my electrical service/meter. </div> <p style="margin-top: 10px;">Describe the type of work being done:</p> 	

A. REQUEST ELECTRICAL SERVICE		Property Owner/Contractor/Developer Only
PRIMARY SITE USE		
RESIDENTIAL <input type="checkbox"/> Single House <input type="checkbox"/> Apartment <input type="checkbox"/> Duplex <input type="checkbox"/> Mobile <input type="checkbox"/> Townhouse <input type="checkbox"/> Condo Other _____ No. of Units _____ Conditioned Square Footage/Unit: _____ sq. ft.	SUBDIVISION No. of Single Family Homes _____ No. of Townhomes _____ No. of Apartments/Condos _____ No. of Other Units _____ Total Units/Lots _____	COMMERCIAL <div style="display: flex;"> <div style="flex: 1;"> <input type="checkbox"/> Store <input type="checkbox"/> Restaurant <input type="checkbox"/> Office <input type="checkbox"/> Warehouse <input type="checkbox"/> Condo <input type="checkbox"/> Apartment <input type="checkbox"/> Other </div> <div style="flex: 1;"> Total Conditioned sq. ft. _____ No. of Units _____ Total Conditioned sq. ft. _____ No. of Units _____ Total Conditioned sq. ft. _____ No. of Units _____ Total Conditioned sq. ft. _____ No. of Units _____ Total Conditioned sq. ft. _____ No. of Units _____ Total Conditioned sq. ft. _____ No. of Units _____ Total Conditioned sq. ft. _____ No. of Units _____ </div> </div>
PRIMARY HEAT		
<input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Heat Pump <input type="checkbox"/> Propane Central Air: <input type="checkbox"/> YES <input type="checkbox"/> NO		
B. ELECTRIC SERVICE		<input type="checkbox"/> TEMPORARY <input type="checkbox"/> PERMANENT
TYPE OF ELECTRIC SERVICE	VOLTAGE	
<input type="checkbox"/> Overhead <input type="checkbox"/> Underground Other _____ <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Residential	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> 120/208 single phase, three wire <input type="checkbox"/> 120/240 single phase, three wire <input type="checkbox"/> 120/208 three phase, four wire </div> <div style="width: 50%;"> <input type="checkbox"/> 120/240 three phase, four wire <input type="checkbox"/> 277/480 three phase, four wire <input type="checkbox"/> Primary Voltage </div> </div>	
ELECTRIC LOAD INFORMATION		
Total Main Breaker size (AMPS) _____ Electrician name _____ Phone _____		
<i>Applicants should also contact the Town of Easton for additional requirements regarding New Utility services. This application may require copies of documents prepared by a registered design professional for New Electric, Gas, and Water Utility Service requests. The Customer Service Center at Easton Utilities can answer any questions regarding the completion of this application.</i>		

APPLICATION FOR GAS SERVICE ONLY

C5. GAS SERVICE

☐ **TEMPORARY**

☐ **PERMANENT**

TYPE OF GAS SERVICE

☐ Residential

☐ Commercial

Describe the type of work being done:

GAS LOAD INFORMATION

GAS LOAD

☐ Gas House Heater _____ BTU/HR

☐ Gas Pool Heater _____ BTU/HR

☐ Gas Generator _____ BTU/HR

☐ Gas Range _____ BTU/HR

☐ Gas Fireplace _____ BTU/HR

☐ Gas Boiler _____ BTU/HR

☐ Gas Water Heater _____ BTU/HR

☐ Gas Other _____ BTU/HR

☐ Process Gas _____ BTU/HR

Pressure Requested: ☐ 7" Water Column

☐ @2PSIG

Contractor Name _____

Phone _____

MD License # _____

Applicants should also contact the Town of Easton for additional requirements regarding New Utility services. This application may require copies of documents prepared by a registered design professional for New Electric, Gas, and Water Utility Service requests. The Customer Service Center at Easton Utilities can answer any questions regarding the completion of this application.

APPLICATION FOR WATER SERVICE ONLY

C6. WATER SERVICE

☐ **TEMPORARY**

☐ **PERMANENT**

TYPE OF WATER SERVICE

☐ Residential ☐ Commercial ☐ No. of Equivalent Dwelling Units (EDU) _____

- For single-family homes, use one (1) EDU
- For multi-unit dwellings or commercial properties, consult the Easton Utilities Water and Wastewater Tariffs or call 410-822-6110

Describe the type of work being done:

Water and Wastewater service may be subject to capital and connection fees. Contact Easton Utilities for more information.

OTHER WATER AND WASTEWATER RELATED REQUESTS

I WANT TO...

☐ Add IRRIGATION METER

☐ Add Other (Specify) _____

Applicants should also contact the Town of Easton for additional requirements regarding New Utility services. This application may require copies of documents prepared by a registered design professional for New Electric, Gas, and Water Utility Service requests. The Customer Service Center at Easton Utilities can answer any questions regarding the completion of this application.

Upon receipt of the site plan, with complete information as described below and this "Liability Waiver", signed by the owner(s), Easton Utilities will design and install utility service to the property.

Location on the property where the service will be installed:

Note special requirements, or issues regarding the location of service. Routing, venting, future outdoor structures, etc.

Site Plan and Underground Utility Locations:

The property owner must supply to Easton Utilities a site plan showing property lines, dwelling and structure location(s), requested meter location, and all private or customer owned underground pipes, wires, cables, drain fields, telephone lines etc. along with the approximate depth of these facilities. If unknown, note on the site plan sketch.

Trenching and Backfilling:

Easton Utilities will trench or excavate approximately 30-48 inches to install service. Easton Utilities will back fill the trench and mound the excess dirt to allow for settlement. The owner will be responsible for any additional backfilling or restoration work. Please note some minor surface damage will occur during construction. (i.e. minor impressions, disturbed soil or sod, etc.)

Construction Over Service Lines Not Permitted:

Some samples include but are not limited to decks, patios, sidewalks, pools, garages, car ports, sheds, animal shelters, air conditioner pads, etc. If this is done after service is installed, Easton Utilities will relocate the service at the owner's expense.

Crossing Property Lines:

Installation of some services will require Easton utilities to perform work in the utility right-of-way on adjoining or neighboring properties. Property owners are specifically prohibited from locating facilities in utility easements and right-of-way. Easton Utilities is NOT responsible for damage to any unmarked facilities in utility easements or rights-of-way regardless of ownership.

I HEREBY AGREE TO HOLD EASTON UTILITIES AND ITS SUB-CONTRACTORS HARMLESS FROM ANY LOSS, COST, DAMAGE, EXPENSE, OR INJURIES RESULTING FROM INACCURACIES ON THE SUBMITTED SITE PLAN.

Owner: _____ Date _____

Owner: _____ Date _____

Return this form to:

Easton Utilities, 201 N. Washington Street, PO BOX 1189 Easton, MD 21601

410-822-6110

☐ GAS

☐ ELECTRIC

REV. 051

Call 1-800-441-8355 at least two (2) business days prior to digging- it's a Maryland Law!

Anyone planning to alter the surface of the ground-by digging new gardens or driving rods, pins or fence posts into the ground- MUST use this free service. Miss Utility will notify Easton Utilities of your proposed excavation plans so a utility representative can mark the location of any underground utility lines or pipes. Utility locations will be indicated by ground paint and /or flags so you can dig safely. Anyone failing to comply with Miss Utility laws is subject to a civil penalty of \$1,000 or 10 times the cost of repairs. Homeowners may also call Miss Utility by dialing 8-1-1.

Property Owners Must Mark All Underground Facilities

Property owners are reminded that they are responsible for locating ALL underground facilities. Easton Utilities is not responsible for damage to underground facilities that have not been properly marked. Some facilities, particularly those that have no metal in them, will NOT be located by Miss Utility. Property owners must locate and mark these facilities. Some of the typical facilities that may not be located through Miss Utility include:

- Invisible Fence Wiring
- Landscape Lighting Wiring
- Irrigation and Sprinkler Systems
- Hoses
- PVC and other Plastic Pipes
- Well and Septic Pipes
- Underground Drainage Systems

___ Initials (acknowledges page 2 has been read)

For more information, visit www.missutility.net