

Coatesville Power and Light Co.

Application for electric service provided by the Town of Coatesville

Please Print:

Name _____

Address _____

Tel.No. _____

Social Security Number: _____

Place of Employment : _____

How Long Employed There: _____

Location of House/Business for which
Service is requested:

Previous Utility Supplier:
Electric _____

Property Owner / Name and address:

Date: _____

Applicants Signature _____

Meter Deposit _____