

City of Denham Springs  
UTILITY BILLING DEPARTMENT

941 Government Drive  
POB 1629  
Denham Springs, LA 70726  
Phone 225 667-8330

Denham Springs, LA 70727-1629  
Email utilities@cityofdenhamsprings.com

Application for Utility Services – COMMERCIAL

**NOTE: Driver's License or Government Issued Picture ID Required. This application must be submitted in person.**

CHECK SERVICES REQUESTED: ( ) WATER ( ) SEWER ( ) GARBAGE ( ) GAS  
PRINT OR TYPE

BUSINESS NAME (dba) \_\_\_\_\_

PARENT COMPANY (If Different) \_\_\_\_\_

OWNER NAME(S) (List All) \_\_\_\_\_  
(FULL Legal Names Required)

UTILITY SERVICE ADDRESS (No., Street, City, Zip) \_\_\_\_\_

MAILING ADDRESS (If Different) \_\_\_\_\_

SERVICE START DATE REQUESTED \_\_\_\_\_ TAX ID NUMBER \_\_\_\_\_

PHONE NUMBER(S) (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

**PREVIOUS OR CURRENT SERVICE UNDER OTHER BUSINESS NAME(S) OR DIFFERENT OWNERS:**

BUSINESS NAME(S) \_\_\_\_\_

OTHER OWNER(S) \_\_\_\_\_

Applicant Signature

TITLE/POSITION

Second Applicant Signature

TITLE/POSITION

**NOTE: A two-hour appointment time is necessary to connect GAS services. A person of legal age must be at this location during the time requested. If you are not at this address when we arrive, it will be necessary for you to call our office and reschedule your 'light-up' time for a future date. A service charge of \$25.00 may be charged for missed appointments.**

*DO NOT WRITE BELOW THIS LINE*

**FOR OFFICE USE ONLY:**

Account Number \_\_\_\_\_ Date \_\_\_\_\_

Receipt Number \_\_\_\_\_ Deposit Amount \$ \_\_\_\_\_

Payment Method: ( ) Cash ( ) Check, Drawn on \_\_\_\_\_ # \_\_\_\_\_

( ) Credit Card - Type \_\_\_\_\_ # \_\_\_\_\_ Expires \_\_\_\_\_