



City of Donaldsonville

P.O. Box 470 Donaldsonville, LA 70346 | Phone (225) 473-4247 • Fax (225) 473-0630

APPLICATION AND AGREEMENT FOR GAS SERVICE

Name of Applicant	
Service Location	Class of Service
Billing Address	

The undersigned hereby applies to the CITY OF DONALDSONVILLE, Louisiana, for natural gas service at the premises designated above and agrees to take and pay for gas at such rates as may be now or hereafter fixed by the City of Donaldsonville for the aforesaid class of service. (Copy of current rates and regulations are available upon request.)

The applicant agrees that the following shall be conditions precedent to the furnishing of gas service by the City of Donaldsonville.

1. The applicant agrees to make a deposit of \$_____, which shall make the applicant bound by, and obligates the applicant to observe all of the rules and regulations that are now and may hereafter be prescribed by the City of Donaldsonville relative to gas service, including the time method and manner of installing and maintaining equipment, payment of bills, discontinuance of service, etc. This deposit will be retained by the City of Donaldsonville as a meter deposit until such time that services are discontinued.
2. A **10% penalty** will be added to all bills if not paid by the **10th of the month** following date of issue of bill.
3. All bills for service, as well as all service charges or penalties that are now or may hereafter be prescribed by the City of Donaldsonville in its gas service regulations, shall have been promptly paid.
4. A \$_____ reconnect charge shall be charged if bills are not paid.
5. The City of Donaldsonville shall have the right to enter upon the premises at any reasonable time for the purpose of servicing its equipment, reading meters, discontinuing service, or for any other reason necessary and incidental to the conduct of its business as a gas distributor.
6. The City of Donaldsonville shall install at its own cost meters and regulators necessary for the furnishing of gas service.

Signature _____ Date _____
of Applicant

RECEIPT

Received From _____ Date _____ 20____

Cash _____ Dollars \$ _____

Check _____

Money Order _____ Received By _____