



TOWN OF GRIMESLAND
P.O. Box 147
7592 Pitt Street
Grimesland NC 27837
Phone 252-752-6337 Fax 252-752-7433
www.grimesland.org

Upon submitting your application (must be in person), please bring with you your Photo ID (Driver's License), Your Social Security Card, and Deposit amount (\$165.00) unless told different. Please provide a copy of your signed Lease agreement.

Date: _____

Name: _____

Service Address: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Driver's License Number: _____

Phone Number: _____ Cell Number: _____

Social Security Number: _____ Work Number: _____

Email: _____ Employer: _____

Applicant Signature _____ **Date:** _____

Are you the Owner or Renter? _____

Please provide a copy of your signed Lease agreement

- If Leasing Please list Lessor's name _____

Address: _____ Home Phone: _____

Work Phone: _____

SPOUSE OR CO-Applicant INFORMATION

Name: _____ Phone Number: _____

Date of Birth: _____ Work Number: _____

Social Security Number: _____ Driver's License Number _____

E-mail Address: _____ Employer: _____

Co-Applicant Signature: _____ **Date:** _____

For Office Use Only:

Deposit _____ Photo ID _____ Lease: _____

Social Security: _____ Acct#: _____ Meter# _____