

*City of Salamanca*  
**BOARD OF PUBLIC UTILITIES**

225 Wildwood Avenue Suite 6  
Salamanca, NY 14779-1580  
(716) 945-3130  
FAX (716) 945-3490

APPLICATION FOR COMMERCIAL OR INDUSTRIAL UTILITY SERVICES

CORPORATE NAME:

CORPORATE HEADQUARTERS:

CONTACT PERSON:

TELEPHONE NUMBER:

LOCATION OF SERVICE REQUEST:

ADDRESS TO WHOM BILLINGS ARE TO BE FORWARDED:

TO THE ATTENTION OF:

TELEPHONE NUMBER:

Having applied to the City of Salamanca Board of Public Utilities for Electric, Water, & Sewer Service for the premises specified above, I affirm that statements made on this application are true under the penalties of perjury.

SIGNATURE OF APPLICANT: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_