

PROPERTY: _____

OWNERS: _____

UTILITIES

1) **ELECTRIC:** Who is your supplier? _____

What is your AVERAGE monthly bill? \$ _____

Budget Plan? YES or NO

2) **GAS** (if applicable): Who is your supplier? _____

What is your AVERAGE monthly bill? \$ _____

3) **FUEL OIL** (if applicable): _____

Who is your supplier? _____

What is your AVERAGE monthly bill? _____

Budget Plan? YES or NO

4) **WATER:**

What is your AVERAGE quarterly bill? \$ _____

5) **SEWER:**

What is your AVERAGE quarterly bill? \$ _____

6) **TRASH REMOVAL:**

Who is your trash removal company? _____

What is your quarterly bill? _____

Signature

Date

(This information is not guaranteed – Utility costs will vary.)