



Utility Activation Form

Last name: _____ First name: _____

Last name: _____ First name: _____

Address: _____ Unit # _____

Arlington Heights, IL 60004

This form is to verify that I have had the utilities put in my name. I have also obtained Renter's Insurance.

Utilities

Nicor Gas Account # _____

Commonwealth Edison Account # _____

Water, sewer and trash will be set up by the management office in my name.

Renter's Insurance

Renter's Insurance Policy # _____

(Please attach a copy of the policy)

Insurance Company Name: _____

Address: _____

Phone# _____

Agent name/number: _____

I understand that keys will not be released to me until I have this information.

Signature

Signature

Date

Agent for Owner