

SELLER UTILITY CHECKLIST

According to contract, utilities must be left active until closing

ADDRESS: 4683 S 516 RD

ELECTRIC COMPANY: 2REC Monthly AVG: _____
Acct #/Meter # _____ Phone #: _____

WATER COMPANY: TPWA Monthly AVG: _____
Acct #: _____ Phone #: _____ Transfer Fee: _____

GAS COMPANY: N/A Monthly AVG: _____
Acct #: _____ Phone #: _____

PROPANE COMPANY: N/A Phone # _____
Owned ___ Leased ___

TRASH SERVICE: ~~PROVA~~ Bills Trash FRIDAY Trash Day: _____
Phone #: _____

Internet Provider: 2REC Monthly AVG: _____

Phone #: _____ **NOTE: Seller is responsible for returning modem**

Security System: N/A Monthly AVG: _____
Phone #: _____ # of Cameras: _____

HOA: N/A Dues: _____
President: N/A Phone: _____

Homeowners Insurance Company _____ Annual Premium Amount: _____

Septic Tank?: What kind?(aerobic, lateral lines, etc) _____

Date of Last Pump: N/A Where is it located on property?

1 HOUSE KEY
1 GARAGE REMOTE