

## SELLER UTILITY CHECKLIST

According to contract, utilities must be left active until closing

ADDRESS: 25031 S. 490th

ELECTRIC COMPANY: \_\_\_\_\_ Monthly AVG: \_\_\_\_\_  
Acct #/Meter # \_\_\_\_\_ Phone #: \_\_\_\_\_

WATER COMPANY: \_\_\_\_\_ Monthly AVG: \_\_\_\_\_  
Acct #: \_\_\_\_\_ Phone #: \_\_\_\_\_ Transfer Fee: \_\_\_\_\_

GAS COMPANY: \_\_\_\_\_ Monthly AVG: \_\_\_\_\_  
Acct #: \_\_\_\_\_ Phone #: \_\_\_\_\_

PROPANE COMPANY: \_\_\_\_\_ Phone # \_\_\_\_\_  
Owned \_\_\_ Leased \_\_\_

TRASH SERVICE: \_\_\_\_\_ Trash Day: \_\_\_\_\_  
Phone #: \_\_\_\_\_

Internet Provider: \_\_\_\_\_ Monthly AVG: \_\_\_\_\_

Phone #: \_\_\_\_\_ \*\*NOTE: Seller is responsible for returning modem\*\*

Security System: \_\_\_\_\_ Monthly AVG: \_\_\_\_\_

Phone #: \_\_\_\_\_ # of Cameras: \_\_\_\_\_

HOA: \_\_\_\_\_ Dues: \_\_\_\_\_

President: N/A Phone: \_\_\_\_\_

Homeowners Insurance Company \_\_\_\_\_ Annual Premium Amount: \_\_\_\_\_

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

Date of Last Pump: \_\_\_\_\_ Where is it located on property?