

**CHARTER TOWNSHIP OF MADISON
4008 S. ADRIAN HIGHWAY
ADRIAN, MI 49221
517-263-9313**

UTILITY SECURITY DEPOSIT

DATE: _____

NAME: _____

PHONE: _____

ADDRESS: _____

E-MAIL: _____

WOULD YOU PREFER PAPERLESS BILLING? YES _____ NO _____

PURCHASED HOME _____

NEW RENTER _____ **OWNER** _____

EFFECTIVE DATE:

MOVE IN DATE: _____

MOVE OUT DATE: _____

PAID \$100.00 UTILITY DEPOSIT

REFUND DEPOSIT

CHECK# _____

DATE: _____

CASH _____

AMOUNT: _____

RECEIPT# _____

SIGNATURE: _____

RECEIVED BY: _____