



**CUSTOMER SERVICE**

401 N TRENTON AVE  
RUSTON, LA 71270  
318-251-8675  
FAX: 318-251-8684

DATE: \_\_\_\_\_

To: City of Ruston  
Customer Service Dept.

From: \_\_\_\_\_  
Rental Manager/Owner

Phone No. \_\_\_\_\_

Fax No. \_\_\_\_\_

Complex Name: \_\_\_\_\_

Complex Address: \_\_\_\_\_

Apt./Lot No. \_\_\_\_\_ (must be exact number)

Name of New Tenant: \_\_\_\_\_

Date Tenant Moved In: \_\_\_\_\_

Previous Tenant: \_\_\_\_\_

Please provide the above information to assist your tenant in obtaining utility services at the correct address. It is important that the apt. or lot number be exact to insure that the customer is properly serviced. Signatures of both parties are required, if no signature, no services will be rendered.

\_\_\_\_\_  
Rental Manager/Owner Signature

\_\_\_\_\_  
Tenant Signature