PROVO CITY UTILITIES
COSIGNER AGREEMENT

In lieu of charging a security deposit we are accepting the signature of a co-signer for the following Provo City Customer

Name _____ **Cust ID** _____

Address _____ **Premise #** _____

I hereby guarantee the payment of all bills for such service or transfer of service for the above customer from the date below until the account is closed or until 15 days after I have given notice that I wish to cancel this agreement and withdraw as guarantor. I agree that any unpaid bills on the above account may be charged against my account listed below.

Cosigner Signature _____ **Date** _____

Cosigner Address _____

Account # _____ **Phone #** _____

*Notirization Required