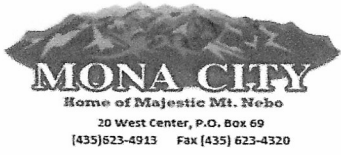


2-12-19



Mona City Natural Gas Reconnection Agreement

Date _____

HOMEOWNER: _____

ADDRESS: _____

PHONE: _____

METER ID#: _____

(office use only)

I certify that I am the homeowner and/^{or Change} reside at the address listed above. I give the Mona City Employee permission to reconnect the Natural Gas Utility in which Mona City provides. In signing this agreement, I understand that I will not hold Mona City liable for any damages if/when they occur after the reconnection.

Age Limit

Homeowner Signature

Mona City Employee Signature