Service request form for property managers, owners and realtors



In order to process your request in a timely manner, please complete all required fields (*) and submit a copy of your completed application via fax at 812-491-4477 or email at Credit_Risk@CenterPointEnergy.com.

Important! Additional documentation required

- Property managers: Please attach property management agreement or authorization letter with this completed form.
- Realtors: Please attach listing agreements or authorization letter with this completed form.

	INFORMATION

1	Deeded	OWDOR	infor	mation
Ι.	Deeded	owner	Intori	mation

Deeded owner name*	Deeded owner phone number*			Deeded owner email address*		
Deeded owner mailing address*	City*			State*	Zip code*	
Deeded owner Social Security number or federal tax ID* (skip if realtor)						
Social Security number	<u>or</u>	Federal tax ID				

2. Bill to address (if different from above)

Select box if bill to address matches deeded owner mailing address

Bill to mailing address*	City*	State*	Zip code*

3. Property manager or realtor information

Requestor name*		Requestor company name*		Requestor title*		
Phone number* Requestor Email address*		SS*	Realtor SSN or Federal tax ID* (if realtor)			
			Social security number	<u>or</u> Federal tax ID		

SERVICE REQUEST INFORMATION

If you are completing this form for more than one (1) property, provide all information below on a separate sheet of paper for each additional property. Please indicate if access instructions are the same for all properties. **Our technician must have access to the meter(s) to complete the service request. Ensure the path to the meter(s) is clear of any obstructions.**

1. Service location

Service address*		City*			State*	Zip code*
						·
Requested service date* (up to 30 days from today)	Property purchas	se date (skip if	f realtor)	Select services	to start* (select all that apply)
	Provide month and y	ear of purchase (I	MM/YYYY)	Start gas serv	/ice	Start electric service
Contact name (on day of service)*	Contact phone (on day o	f service)*	Will there be	pets on the prop	erty?* (Se	lect one)
				s (contained where	e?)	
Access instructions* (select one)			ccess instruct			
Key will be stored in lockbox <i>(provide code)</i> Adult at property during the service window Call me 30 minutes before arrival†		Provide any ins	structions necess	ary to access the met	ter(s) at the lo	cation.

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[†]By selecting this option, you are indicating that you will be available to answer this phone call at any time during the service window, and will be able to provide access to our service technician. Please note: the call you receive from our service technician may be recognized as an "Unknown" phone number.