

# Utility & Service Providers



**HANKS**  
REALTY GROUP

BROKERED BY

**exp**  
REALTY

218 Wright Street, Gastonia NC

| Utility                                                                              | Provider                                                                                                                | Notes                 |                                                                       |      |     |                                                                       |
|--------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|-----------------------|-----------------------------------------------------------------------|------|-----|-----------------------------------------------------------------------|
| POWER                                                                                | Duke Power                                                                                                              |                       |                                                                       |      |     |                                                                       |
| WATER                                                                                | Duke Power                                                                                                              |                       |                                                                       |      |     |                                                                       |
| SEWER                                                                                | Septic                                                                                                                  |                       |                                                                       |      |     |                                                                       |
| <div>NATURAL GAS / PROPANE /<br/>OIL<br/>Circle One</div>                            | Enbridge                                                                                                                |                       |                                                                       |      |     |                                                                       |
| MAIL DELIVERY                                                                        | House <input checked="" type="checkbox"/> / Cluster Box <input type="checkbox"/> / P.O.<br>Box <input type="checkbox"/> | MAILBOX NUMBER: _____ |                                                                       |      |     |                                                                       |
| Service                                                                              | Provider                                                                                                                | Notes                 | Contract?                                                             |      |     |                                                                       |
| GARBAGE                                                                              | Waste Pro                                                                                                               |                       | Yes <input type="checkbox"/> / No <input checked="" type="checkbox"/> |      |     |                                                                       |
| RECYCLING                                                                            | Waste Pro                                                                                                               |                       | Yes <input type="checkbox"/> / No <input checked="" type="checkbox"/> |      |     |                                                                       |
| PICK-UP DAY                                                                          | <div>Mon</div>                                                                                                          | Tue                   | Wed                                                                   | Thur | Fri | Sat                                                                   |
| <div>CABLE / SATELLITE<br/>Circle One</div>                                          | Spectrum                                                                                                                |                       |                                                                       |      |     | Yes <input type="checkbox"/> / No <input checked="" type="checkbox"/> |
| INTERNET                                                                             | Spectrum                                                                                                                |                       |                                                                       |      |     | Yes <input type="checkbox"/> / No <input checked="" type="checkbox"/> |
| Internet Equipment Stays? Yes <input type="checkbox"/> / No <input type="checkbox"/> |                                                                                                                         |                       |                                                                       |      |     |                                                                       |
| SECURITY                                                                             | Ring                                                                                                                    |                       |                                                                       |      |     | Yes <input type="checkbox"/> / No <input checked="" type="checkbox"/> |
| Security Equipment Stays? Yes <input type="checkbox"/> / No <input type="checkbox"/> |                                                                                                                         |                       |                                                                       |      |     |                                                                       |
| HVAC                                                                                 | None                                                                                                                    |                       |                                                                       |      |     | Yes <input type="checkbox"/> / No <input type="checkbox"/>            |
| PEST CONTROL                                                                         | None                                                                                                                    |                       |                                                                       |      |     | Yes <input type="checkbox"/> / No <input type="checkbox"/>            |
| LAWN CARE                                                                            | None                                                                                                                    |                       |                                                                       |      |     | Yes <input type="checkbox"/> / No <input type="checkbox"/>            |
| OTHERS                                                                               |                                                                                                                         |                       |                                                                       |      |     | Yes <input type="checkbox"/> / No <input type="checkbox"/>            |