Platte County
Department of Public Works

Platte County Utility Registration

Date: _____

Company:	
Phone:	
Fax:	
Address:	
City, State, Zip:	
Email:	
Primary Point of Contact:	
Phone:	
Mobile:	
Fax:	
Address:	
City, State, Zip:	
Email:	
Signature:	

Notes:	
**A new Utility Registration sheet must be submitted yearly, and every time information changes.*	

Contractor:	
Contact Name:	
Phone:	
Mobile:	
Fax:	
Address:	
City, State, Zip	
Email:	

Contractor:	
Contact Name:	
Phone:	
Mobile:	
Fax:	
Address:	
City, State, Zip:	
Email:	

Contractor:	
Contact Name:	
Phone:	
Mobile:	
Fax:	
Address:	
City, State, Zip:	
Email:	

Contractor:	
Contact Name:	
Phone:	
Mobile:	
Fax:	
Address:	
City, State, Zip:	
Email:	