

## APPLICATION FOR ( )WATER ( ) SEWER ( ) GARBAGE

LAST NAME (Legal Name)	FIRST NAME	PHONE #	SS#	EMAIL ADDRESS
LAST NAME (CO-APPLICANT) FIRST NAME		PHONE#	SS#	EMAIL ADDRESS
OWN HOME? (YES) (NO)				
*	LANDLORDS NAME		PHONE#	

SERVICE ADDRESS

MAILING ADDRESS (if different from above)

\*\* THE AMOUNT OF THE BILL IS DUE AND PAYABLE <u>ON OR BEFORE 5PM ON THE 15<sup>TH</sup></u> OF EACH MONTH; AFTER THIS, A <u>LATE FEE EQUAL TO 10%</u> OF THE OUTSTANDING BALANCE WILL BE APPLIED. IF THE BILL IS NOT <u>PAID BY THE 20<sup>TH</sup> OF THE MONTH</u>, A <u>\$25.00 NON-PAYMENT FEE</u> AND A <u>\$25.00 REINSTATEMENT FEE</u> WILL ALSO BE APPLIED. SERVICE WILL BE DISCONNECTED ON THE 21<sup>ST</sup> AND WILL NOT BE RESTORED UNTIL THE BILL IS **PAID IN FULL**, TO INCLUDE **ALL FEES**.

## IF A LOCK IS FORCIBLY REMOVED FROM A METER, THE ACCOUNT WILL BE CHARGED A \$50.00 METER TAMPERING FEE AND/OR THE SHERIFF'S DEPARTMENT WILL BE NOTIFIED.

**\*\* TO DISCONTINUE SERVICE:** THE INDIVIDUAL WHOSE NAME IS ON THE ACCOUNT <u>MUST</u> COME INTO THE CITY HALL AND SIGN A REQUEST TO DISCONNECT SERVICE BEFORE ANY REFUND OF DEPOSITS CAN BE MADE AND SERVICE DISCONNECTED.

SIGNATURE			DATE			
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~~~~~~~~~~~~~~~~~~OFFICE USE ONLY~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~						
WO#	() Residential	() R- Irrigation	() Backflow Double Check			
ACCT #	() Commercial	() C- Irrigation	() Backflow RPZ			
Deposit Amt \$	Receipt #		Copy of ( ) Lease and ( ) ID/DL			
Book Stop	BMR	EMR	Date Closed			