



# APPLICATION FOR WATER/SEWER & SOLID WASTE COLLECTION SERVICE

Date: \_\_\_\_\_

**SERVICE ADDRESS:** \_\_\_\_\_

PROPERTY OWNER NAME: \_\_\_\_\_

**APPLICANT NAME:** \_\_\_\_\_ **SOCIAL SECURITY #:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_ **CELL #:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

CO-APPLICANT: \_\_\_\_\_ **SOCIAL SECURITY #:** \_\_\_\_\_  
EMPLOYER  
NAME/ADDRESS: \_\_\_\_\_

To receive account notifications for your utility account, please check all that apply:  
 Ok to leave voice message  to send message (standard text fees may apply)

\*\*\*\*\*

TYPE OF SERVICE:  
COMMERCIAL ACCOUNT: \_\_\_\_\_  
WATER/SEWER (Outside City): \_\_\_\_\_  
WATER/SEWER: \_\_\_\_\_ DEPOSIT \$ \_\_\_\_\_  
(REFUNDABLE)

**SERVICE REQUEST DATE:** \_\_\_\_\_ **GARBAGE COLLECTION DAY:** M, T, W, TH, F

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Per the Privacy Act of 1974, Social Security numbers are used for collection purposes only and will not be shared or made public.

I HAVE READ AND UNDERSTAND THE POLICIES ON THE BACK AND/OR ATTACHMENTS AND HEREBY APPLY FOR SERVICES.

IN THE EVENT ANY UNPAID BALANCE IS PLACED FOR COLLECTIONS WITH ANY 3<sup>RD</sup> PARTY COLLECTION AGENCY, AND/OR PLACED WITH AN ATTORNEY TO OBTAIN JUDGEMENT OR OTHERWISE SATISFY PAYMENT OF THIS ACCOUNT, A FEE OF 15% OF THE UNPAID BALANCE WILL BE ADDED TO THE TOTAL DUE.

**(CUSTOMER INITIALS)** \_\_\_\_\_ INITIALING HERE INDICATES THAT THE ABOVE MENTIONED TERMS HAVE BEEN EXPLAINED TO ME. I UNDERSTAND THE ABOVE TERMS AND I AGREE ON MY OWN ACCORD TO THE ABOVE TERMS.

\_\_\_\_\_  
**APPLICANT'S SIGNATURE**