

PARKER CITY MUNICIPAL UTILITIES

Residential Utility Service Application

Customer Deposit: \$100.00

Date: _____

Effective Date of Service: _____

PERSONAL INFORMATION:

NAME: _____

SS# _____

WATER/SEWAGE SERVICE ADDRESS: _____

SEND BILL TO THIS ADDRESS? (CIRCLE ONE) YES NO

IF DIFFERENT ADDRESS:

OF PERSONS IN HOUSEHOLD _____

NAME OF OTHER PERSON(S) LIVING WITH YOU:

I OWN THIS PROPERTY (CIRCLE ONE): YES NO

HOME PHONE #: _____

CELL PHONE #: _____

EMAIL ADDRESS: _____

IF RENTING, PROVIDE:

NAME OF OWNER: _____

ADDRESS OF OWNER: _____

PHONE #: _____

I, THE UNDERSIGNED, DO UNDERSTAND AND AGREE THAT:

1. UTILITY BILLS WILL BE MAILED THE 1ST OF THE MONTH.
2. UTILITY BILLS ARE DUE AND PAYABLE ON THE 15TH OF EACH MONTH
3. ALL BILLS FOR WATER/SEWAGE SERVICES NOT PAID BEFORE THE DUE DATE AS STATED ON SUCH BILLS SHALL BE SUBJECT TO THE COLLECTION OR DERERRED PAYMENT CHARGE OF 10% (TEN PERCENT)
- 4, DELINQUENT/ SHUT OFF NOTICES WILL BE MAILED WHEN BILLS ARE DELINQUENT AT THE END OF THE MONTH. IF THE TOTAL AMOUNT OF THE DELINQUENT BILL AND THE CURRENT HAS NOT BEEN PAID BY THE 15TH OF THE MONTH SERVICE WILL BE DISCONNECTED AND WILL NOT BE RECONNECTED UNTIL BALANCE AND \$25 RECONNECT FEE HAS BEEN PAID.
- 5, ANY PRIOR OUTSTANDING AND/OR DELINQUENT WATER/SEWAGE BILL SHALL BE PAID PRIOR TO THE TIME THAT WATER/SEWAGE UTILITY SERVICE MAY BE CONNECTED AT ABOVE REFERENCED SERVICE ADDRESS.
6. IN THE EVENT COLLECTION ACTION BY THE TOWN OF PARKER CITY IS NECESSARY, I AGREE TO PAY ALL COSTS, EXPENSES AND ATTORNEY FEES RESULTING FROM SUCH ACTION.

I CERTIFY THAT THE FOREGOING INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

SIGNATURE OF APPLICANT: _____

DATE: _____