



20 2nd Ave SW
 Oelwein, IA 50662
 319-283-5440

RESIDENTIAL UTILITY SERVICE AGREEMENT INFORMATION – PLEASE PRINT LEGIBLY

Name:		# of people in House:
Maiden name or Previous names		
Date of birth:	SSN:	Phone:
Current address moving into:		
Date of Service:	Owner Occupied <input type="checkbox"/> Rental <input type="checkbox"/>	Renting Landlord Name:
Previous address:		How Long?
City:	State:	Zip Code:

Employment Information

Current employer:	How Long?
-------------------	-----------

Co-applicant Information

Name:		
Maiden name or Previous Names:		
Date of birth:	SSN:	Phone:

Co-applicant Employment Information

Current employer:

Names of occupants over the age of 18:

Name:	Name:
Name:	Name:

Acknowledgement

<input type="checkbox"/> I understand it is my responsibility to contact City Hall to obtain my balance if I do not receive my bill.
<input type="checkbox"/> I understand my utility bill is due by the 15 th day of the month or 10% penalty will be applied.
<input type="checkbox"/> Failure to receive the bill does not excuse the penalty.
<input type="checkbox"/> Payments may be made via cash, check, money order, debit, or credit card either in office, drop box, mail, online, or via automatic withdrawal.
<input type="checkbox"/> Utility Bills 10 days past 2 months past due date are subject to disconnection of service and a charge for reconnection is subject for reconnection.
<input type="checkbox"/> All disconnected accounts are required to be paid in full to a zero (\$0) balance before reconnection.
<input type="checkbox"/> Account must be in a current balance status to transfer services to another location. Any account that has received a disconnection notice will not be allowed to transfer services to a new location until the account is paid.
<input type="checkbox"/> I understand I am responsible for all utility charges for services provided to this location until notice is received, from me, to discontinue my current services.

The undersigned hereby agrees to be financially responsible for the payment of bills presented for utility services.

Signature of Applicant:	Date:
Signature of Co-applicant:	Date: