



City of Falls City
Application for Utility Service

Account# \_\_\_\_\_

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

START DATE: \_\_\_\_\_

House Number and Street Name

APPLICATION BY TENANT(S):

I/We hereby make application for the use of City Water and Sewer Facilities, and agree to comply with all of the Code of Ordinances\*\* that govern the use of those facilities. I/we acknowledge that the property owner/manager will receive a copy of my utility bill.

Print Name of Tenant(s)

Signature of Tenant(s)

Mailing Address

Phone No. (Primary)

City State ZIP

Phone No. (Alternate)

IF UTILITY SERVICE WILL BE IN THE TENANT'S NAME, THE PROPERTY OWNER/AGENT MUST PROVIDE THE FOLLOWING INFORMATION AND SIGN THIS CERTIFICATION.

I/We hereby either make application, or acknowledge the above application by our tenant(s) for the use of City Water and Sewer Facilities, and agree to comply with all the Code of Ordinances\*\* that govern the use of those facilities. I certify that I am the owner of, or one of the owners of the premises, or that I am an authorized agent, or one of the authorized agents of the owner(s), with express authority to bond the owner(s) to the objectives set forth in Chapter 51.05 of the Falls City Municipal Code. I understand and agree that I am liable for unpaid tenant(s) charges as the service address owner/agent of record.

Print Name(s) of Owner(s) or Authorized Agent(s)

Account #

Signature of Owner(s) or Authorized Agent(s)

Mailing Address

Phone No. (Primary)

City, State ZIP

Phone No. (Alternate)

Indicate Use of Property: Residential \_\_\_\_\_ Commercial \_\_\_\_\_ Other (Describe) \_\_\_\_\_

A change in non-residential use and/or occupancy may require business registration and/or land use permits.

Accounts are due and payable on the 15th of each month. Past due accounts are charged a penalty on the 26th of each month. Service will be disconnected, with notice, if account is 30 days past due. Disconnected services are required to pay a reconnection fee and full account balance prior to reconnection.

\*\* Copies of Applicable Sections of the Code of Ordinances available upon request



FOR OFFICE USE ONLY -

Application Received: \_\_\_\_\_

City Representative: \_\_\_\_\_