## **Watertown Municipal Utilities Department**

901 4TH AVE SW Watertown, SD 57201-4107 (605) 882-6233

## **APPLICATION AND AGREEMENT FOR RESIDENTIAL/COMMERCIAL UTILITY SERVICE**

Name:		Desired Connection Date:		
Service A	.ddress:	_		
Mail bills	to:			
City:			State:	Zipcode:
Previous	Address:			
City:	-		State:	Zipcode:
Own/Rer	nt:	Landlord:		<u> </u>
Phone #:		Employer:		
Work #:		Have you been on our utilities before?		
Cell #:		SSN/FIN		
Birthdate	<u></u>	Email Address:		
Contact Person for Bus		 S:		
1. 2. 3. 4. 5.	Bills are mailed at the end Call the office if you do not Bills not paid by the due on the received prior to the You will also be charged at Deposits will be applied to 12 consecutive payments of the You move:  a. Call the office at b. We cannot take c. If your deposit of the final bill is of the final bill is of you want your utility in the Unpaid commercial according to the final be transported.	late will be charged a <b>5% late charge.</b> A class and control of the disconnection notice.	lisconnection notice will e, your service will be disedit.  Teturned checks.)  Tutilities left on in your hoother than you.  Ito your final bill.  Ctions after the 90 day noting a third party or call the	be mailed out to you. If payment is connected until payment is made.  ome.  otice has been sent.  ne office.
Customer's Signature				Date
Co-signer's Signature				Date
Co-signer's	S Name			
Account #		Personal ID (driver's lice	nse. picture ID):	

Receipt #:

Deposit Amount: