

CITY OF PERRY UTILITIES APPLICATION

NAME _____

STREET ADDRESS _____

P.O. BOX # _____

PHONE NUMBER _____

IF RENTING OWNERS NAME _____

BILLING ADDRESS OF OWNER _____

PHONE NUMBER OF OWNER _____

DATE OF SERVICE TO BE TURNED ON _____

DATE SERVICE TO BE TURNED OFF _____

FORWARDING ADDRESS _____

DATE DEPOSIT MADE _____

AMOUNT OF DEPOSIT _____ CHECK _ CASH _ OTHER

All utility bills must be PAID by the 10th of the month or a penalty will be added.

NONPAYMENT OF BILL BY 5:00 P.M. on the 23rd of the month will cause water to be shut off and a \$30.00 reconnection fee will be charged.

SIGNATURE OF APPLICANT _____

DATE OF APPLICATION _____