**APPLICATION FOR COMBINED SERVICE ACCOUNT**

**City of Donnellson, Iowa**

P.O. Box 50 / 802 Pershing Avenue Donnellson, IA 52625

Phone 319-835-5714 Fax 319-835-9224

Applicant (Owner)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant (Owner)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Service Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Connection Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby apply for water/sewer/garbage(if residential) services for the service address listed above. I agree to pay all bills rendered by the City of Donnellson for services received from the date of connection to the date that the service is terminated. I further agree to give written notice to the City of Donnellson if any changes are necessary to this application. Any applicant desiring to discontinue the water service to his premises for any reason must fill out a service termination form at city hall otherwise, the applicant shall remain liable for all water used and service rendered by the City until said notice is received by the city. I also agree to supply City of Donnellson with a valid address in which to send my final bill.

I understand that bills are due by the 10th of each month for services used from the previous month. Bills not paid by the 10th of the month shall be considered delinquent, a 10% penalty of the amount due shall be added to each delinquent bill. If bill is not paid by the 24th of the month a 24 hour disconnection notice will be hung at the property and a $10 hanging fee will be added to the account. Services will be discontinued on the 25th of the month if bill has not been paid. A $40 fee shall be charged along with the total past due amount before service is restored.

A fee of ten ($10) shall be charged for the usual or customary trips in the regular changes in occupancies or property for the temporary discontinuance of service at the request of the consumer.

**Deposit Required** – renters are required to pay a $200 deposit fee. Once a renter moves out, the deposit will be applied to their final bill and any amount remaining will be sent to the applicant at forwarding address provided.

Applicant (Owner) Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I designate the following person, **not living at the above address**, to contact if City of Donnellson is unable to locate me or if I move without following proper termination procedures, including supplying City of Donnellson with a valid address in which to send my final bill.

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Questions or concerns regarding any water/sewer/garbage related item should be directed to City Hall, 802 Pershing Ave, Donnellson, IA 52625 (319) 835-5714

$10 Setup Fee – Cash or Check \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Check # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date paid \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_