

City of Carlos

Water/Wastewater Service Application

Applicant hereby applies for service with the City of Carlos for the purpose of receiving water and sewer services from the City and agrees:

- He/she is at least 18 years of age and all information provided is complete and accurate.
- To immediately notify the City of any changes to this information.
- To be responsible for the utility account(s) from the connect date to the time the City is notified to discontinue service.
- Service will not be activated until any past due accounts are paid in full.

1) Name(s) on Account _____

2) Service Address _____ Mailing address if different than service address _____
Street address PO Box City, State, Zip

(3) Home Phone # (____) _____ (4) Cell Phone # (____ - ____ - ____)

5) electronic mail address (email) _____

(6) Home Heating Type _____ (7) Effective date of Lease/Purchase _____
Hot air or Hot water

(8) Work Phone # (____) _____ (9) Employer _____

(10) Joint Name Work Phone # (____) _____ (11) Joint Name Employer _____

(12) _____ (_____) _____
Nearest Relative Not Living With You Relationship City, State, Zip Phone

(13) List names of other adults (18 years of age or older) living at this location

(14) () Own () Rent

If renting or leasing, Property Owner's Name, Address and telephone number

Applicant(s) understand water/sewer bills are due in full by the 5th of each month. A 10% penalty is applied to past due balances and service may be disconnected for failure to make prompt payment. By signing this agreement, Applicant(s) accept the provisions contained herein. Signature of Applicants should include both parties for a joint account, and all partners in a partnership. Joint applicants and/or partners of Applicant agree to be individually responsible for this account.

Both signatures are required for a joint application

X _____
Print Complete Name Signature Date

X _____
Print Complete Joint Name Joint Signature Date