

City of Decorah
APPLICATION FOR WATER & SEWER SERVICE

[PLEASE PRINT INFORMATION]

DATE TO START SERVICE OR DATE OF CLOSING (as applicable): _____

SECTION I – APPLICANT INFORMATION

APPLICANT'S NAME: _____
(Person responsible for service payment – must be 18 years of age or older)

SOCIAL SECURITY NUMBER/FEIN: _____ DOB: _____ PHOTO ID PROVIDED: Yes No

PHONE/CELL #: _____ EMAIL: _____

CO –APPLICANT'S NAME: _____
(Other person responsible for service payment)

SOCIAL SECURITY NUMBER/FEIN: _____ DOB: _____ PHOTO ID PROVIDED: Yes No

PHONE/CELL #: _____ EMAIL: _____

SECTION II – SERVICE INFORMATION

SERVICE ADDRESS: _____
Street Address City, State & Zip

OWN (Skip to SECTION IV) RENT (Complete SECTION III)

BILLING ADDRESS: _____
(If different from Service Address)

SECTION III – OWNER INFORMATION

OWNER OF PROPERTY: _____ OWNER PHONE/CELL #: _____

ADDRESS: _____
Street Address City, State & Zip

SECTION IV – CREDIT REFERENCE

[Service may be denied based on payment history]

FORMER ADDRESS: _____

CURRENT EMPLOYER & ADDRESS: _____

PREVIOUS UTILITY COMPANY & ADDRESS _____

SECTION V – CUSTOMER AGREEMENT

By my signature below, I hereby request water and sewer service from the City of Decorah. I understand sewer use and storm water charges, as applicable and as established in Chapter 13 of the Code of Ordinances, will appear on the same billing as the water usage charges. In requesting utility service, I accept full responsibility for any charges, fees, penalties, or other obligations incurred while in my name. I understand that failure to receive a bill does not release me from payment obligations. I warrant that the information furnished for the purpose of obtaining utility service to be true and accurate to the best of my knowledge.

APPLICANT SIGNATURE: _____ DATE: _____

CO-APPLICANT SIGNATURE (when applicable): _____ DATE: _____

*Information contained herein is confidential and is not public record.
Request for changes for this account will only be given to person(s) listed on this application.*