

Please print clearly



City of Shenandoah
500 W. Clarinda Avenue
P.O. Box 338
Shenandoah, Iowa 51601
712-246-1213

Applicant Information

Commercial Utility Application

Business Name: Blue Tickets [radio button]

Office Use Only:
Account Number: _____

Service Address Today's Date

Mailing Address (if different than service address) Service Start Date Previous Address (if applicable)

I am: [checkbox] Owner [checkbox] Agent [checkbox] Renter [If renter, provide landlord name, address and phone number-next page]

Business Type Business Telephone

Owner/Manager Name Telephone Number Email

Driver's License State Driver's License Number Federal Tax ID Number

Co-Applicant Information

Co-Applicant Name Relationship to Applicant

Co-Applicant Telephone Number Work Telephone Number Co-Applicant Date of Birth

Co-Applicant Driver's License & Number Co-Applicant Social Security Number

Customer: This is a Contract, please read the following:

I hereby request City of Shenandoah to furnish utility service to the above service address, and I agree to pay the costs of such services as the bills become due.

Deposits

I understand that a deposit of \$110.00 is required to begin service regardless of previous credit standing. The applicant is required to pay a service deposit in such amounts as may be fixed from time-to-time by the City Council. Deposits paid by home owners shall be refunded after one year, upon demonstration of satisfactory payment record. Renters' deposits shall be held until such time as they move from the city or otherwise cease to become tenants. When customer moves and is no longer in need of City Utility services, the deposit will then be applied to the final balance and the customer will then be sent a check or will be billed for the balance.

Disconnection of Service

If a customer has a dispute over a utility bill, customer shall contact the billing office before the due date of the bill. If a dispute is found to be legitimate, there will be no penalty assessed to the disputed balance but if bill is correct all account balances will be paid by the customer when due. If a customer should neglect or refuse to pay the utility bill on or before the due date, a 10% penalty will be added to the account. A fee of twenty-five dollars (\$25.00 + Tax) will be charged to disconnect delinquent customers. A fee of twenty-five dollars (\$25.00 + Tax) will be charged to reconnect delinquent customers. The total fee shall be fifty dollars (\$50.00 + Tax). No fee will be charged for the usual and customary trips in the regular changes in occupancies of property. All past due amounts owed shall be paid in full before water service is restored. If water is requested to be disconnected after business hours, there will be a fee of seventy-five dollars (\$75.00+Tax).

Agreements

Any person making application with the City of Shenandoah for services is bound to a contract with the said City. If a customer should violate any of the provisions on this contract, or any reasonable rules and regulations the City may adopt thereafter, the City shall disconnect the service until such violation is corrected and order is given by the City to resume service.

I, the applicant, have read and fully understand the above contract. I agree to uphold all reasonable rules and regulations adopted by the City. I further understand that it is the City's right to request proper identification, information and signatures of those responsible for the account. I am aware that it is against the law to knowingly use a false name and that using a false name is punishable by two (2) years in prison, a \$5000.00 fine or both.

Applicant Signature Co-Applicant Signature Date

Landlord Information

I, _____, as owner of _____, Acknowledge, that, pursuant to Section 92.06 of the Code of Ordinances of the City of Shenandoah, Iowa, the owner of the premises served and any lessee or tenant thereof shall be jointly and severally liable for water service charges to the premises. Water service charges remaining unpaid and delinquent shall constitute a lien on the premises served and will be certified by City Clerk to the County Treasurer for collection in the same manner as property taxes.

Landlord Name

Landlord Telephone Number

Landlord Address

City

State

Zip Code

Landlord Signature

Please mark one of the following:

Would you like water services placed back in your name after this renter moves out?

- YES- I wish to have water service remain ON in between my renters. I know that I will be billed for the services from the time a renter moves out until the time a new renter moves in.
- NO- Please turn the service OFF. My next renter will set up an account and have the water service activated.

Please mark one of the following:

Would you like to receive delinquent notices if the renter is behind on their utility bill?

- YES
- NO

Deposit Information

Name of Person Whom Paid

Account #

\$110.00

Date of Deposit

Amount of Deposit

Deposit Transfer Amount

Date of Original Deposit

Account # Transferring From

Deposit Refund

Refund Amount:

Date of Refund:

Check #

Unpaid Final Balance:

Address Refund Mailed to:

Office Use Only:

Blue Tickets Summit Acct Info Deposit Landlord letter Landlord Link Delinquent Notice