

TOWN OF IOWA – RESIDENTIAL UTILITY SERVICE – NEW CUSTOMER INFORMATION

Rent/Lease Name of Landlord _____ PH# _____
 Homeowner

**Deposit for New Service is \$150.00 We accept cash, check, money order, Visa, Mastercard & Discover
(a 4% service fee applies when using a card)**

NAME: _____ TODAY'S DATE _____

SS# (LAST FOUR) _____ DOB _____ DL# _____ STATE _____

SERVICE ADDRESS: _____

MAILING ADDRESS (if different): _____

EMAIL ADDRESS: _____ (will be used in future for water related emergencies)

CELL PHONE: _____ HOME PHONE: _____

EMPLOYMENT: _____ WORK PHONE: _____

SPOUSE/ROOM MATE _____

SS# (LAST FOUR) _____ VALID PHOTO ID/DL # _____ STATE _____

DOB _____ PH# _____

CONTACT NAME (not living with you) _____ PH# _____

Is there a trash can at this service address? Yes No

Is the water on at this service address? Yes No

THE UNDERSIGNED AGREES TO BE RESPONSIBLE FOR ALL UTILITY PAYMENTS FOR SERVICES RENDERED BY THE TOWN OF IOWA IN ACCORDANCE WITH THIS APPLICATION.

Date Service Desired: _____

(Please have all faucets in off position as the Town of Iowa will not be held responsible for any damage)

Applicant Signature _____

OFFICE USE ONLY

Customer number _____ Utility Clerk _____