INTEROFFICE USE ONLY

PREV. ACCT CLOSED_____ACCT. #_____

Copy of Applicant's Drivers License/Other Identification Attached: ☐ Yes ☐ No

CITY OF GALVA, 208 S. Main, P.O. Box 223, Galva, Ks 67443

WATER/UTILITY AGREEMENT AND APPLICATION

APPLICANT IS: ☐ **PROPERTY OWNER** ☐ **RENTER/TENANT**

This form must be accurately complete and provide to the City of Galva prior to Water/Utility hookup. By completing and signing this form, I agree to and accept all the terms, conditions, fees and expenses associates with the requested services.

I. PROPERTY OWNER (To be completed by renter only)

1. Name_____

   Address_____

   Phone Number_____

II. APPLICANT'S INFORMATION

1. Name and Spouse's Name (if applicable)

   _____

   Social Security #:_____ Driver's License #/State:_____

2. Address for utilities to be turned on:_____

3. Mailing Address if different:_____

4. Place of employment and phone #:_____

5. Spouse's place of employment/phone #:_____

6. Have you ever had utilities in the City of Galva? ☐ Yes ☐ No

   If yes, in what name?_____ When?_____

7. Date to be turned on:_____

8. Lot number if new construction:_____

III. FEES AND EXPENSES

1. As the "**homeowner**" I agree to pay a $50.00 service connection fee. I understand that this is a onetime charge and is fully payable to the water/electric hookup. I understand that this fee is not refundable for any reason.
2. As the **"renter"** I agree to pay a $50.00 service connection fee which is not refundable for any reason.
3. At the time a property owner or tenant transfers utility service from one property to another within the city limits, a non-refundable utility transfer fee of $25.00 per service connection shall be paid in lieu of the hookup fee.
4. I understand that if my service is disconnected for non-payment, I must first pay the outstanding bill balance. Additionally, I agree to pay a $25.00 reconnection fee for reconnection during office hours (9:00 a.m. to 4:00 p.m.).
5. I agree to pay a $20.00 fee for any payment returned (includes automatic bank draft).
6. In the event my account is placed with an outside agency for collection, I agree to pay all collection cost, court cost and attorney fees incurred to collect the balance due.
7. I have received and agree to the "Policies" given to me by the City of Galva. I have read and accept all terms and conditions of the agreement. I further agree and state that m signature constitutes not only my acceptance of the agreement but also that of my spouse and any and all other adult occupiers of the residence. If I am signing on behalf of my spouse or another adult person, I state and affirm that I have their authority to bind them to this agreement.
8. All the information contained herein is true and accurate to the best of my knowledge and belief that all this information and signatures are here and made as inducement for the City of Galva to accept this agreement.
9. All utility meters are read on the 20th of the month, and bills are mailed out on the last day of the month, and they are due on the 15th of the next month.

DATE SUBMITTED:_____

_____

APPLICANT SIGNATURE

PHONE NUMBER:_____