City of Elkader <u>APPLICATION FOR UTILITY SERVICES (Residential)</u>

| Move in/out date | |
|--|--|
| Name | |
| | PO Box |
| Alternative mailing address | |
| Phone number (s) | |
| Email | |
| | have your bill emailed to you? |
| Do you want to have your bill automate (another form is needed for this) | atically deducted from your checking or savings account? |
| Drivers License No and state of issue | |
| SSN | Date of Birth |
| OwnRentLandlord | Phone |
| \$50 Connection Fee Paid\$50 Connection Fee On Account\$14 Recycling Box Paid\$14 Recycling Box Fee On Account Will someone else be jointly responsible for the bill? If so, please complete: | |
| Phone number (s) | |
| Drivers License No and state of issue | |
| The above named Applicant and Co-Applicant(s) (hereafter referred to as Applicant) states that the above information provided on the Application for Utility Service is true and accurate. Further, applicant states that applicant is not indebted to the City of Elkader for past municipal utility services, even at a different location and even if under a different name. Further, applicant does state that applicant resides in the above described premises for which utility services are being applied, and that the same shall be applicant domicile and permanent residence. Further, applicant states that applicant will not allow person(s) to live at this residence who are currently indebted to the City of Elkader for past municipal utility services or they will thereby become legally responsible for the outstanding bill. Finally, applicant does state that applicant is applying for municipal utility services in good faith, and that the application is not being made in lieu of or on behalf of another person or persons who will also be residing at the above described address and who has an outstanding, delinquent utility service account with the City of Elkader. The applicant accepts responsibility for payment of utility bills, and agrees to abide all rules and regulations governing service, which are established by the Elkader City Council. Failure to comply may result in termination of service. | |
| Signature of Applicant(s) | Date |

FOR OFFICE USE ONLY (initial and date when task is complete) 1. Work order for read-in or read-out? Meter Reading 2. Move-in/move-out screen (under UB, entry, service order entry screen) Account number of move-out: New account number: Account number of move-out LL if applicable: 3. Does meter reading number need to be adjusted? (UB/entry/meter reading) 4. Miscellaneous charges screen (under UB, entry) Connection Fee: Paid or added to bill? _____ (unless they have a new housing incentive) GA Admin fee added to bill? Recycling bin added to bill? _____ (unless they have a new housing incentive) 5. Entered info from application in account set-up screen (DL, SS, co-occupant info, etc.) 6. Review account/services: -new customer status? -review active services? Is the correct landlord account associated? (did get meter reading for LL?) -are they a tenant? -if landlord/tenant did the meter reading get transferred to new account properly? -did they get new housing incentive and need base rates inactivated? if so, did you put it on the calendar to re-activate? _____ (month) _____ 7. Enter payment of connection fee or recycling bin if paid at time of application through RM _____ 8. Landlord form on file? _____ (if not, ask LL about it) _____ 9. Proration needed? _____ Entered into computer? _____ New Account #: Pro rate: # of Days GA MR SB WB Old Account #: Pro rate: # of Days GA MR SB WB

Form revised March 2021

10. After billing, go back and change final billed status to inactive