ACCOUNT #

## City of Hawk Point

121 West Lincoln Drive | PO Box 302 | Hawk Point, MO | 63349 Phone: 636-338-4377 \* Fax 636-338-4827

## UTILITY CONTRACT RESIDENTIAL

Printed Name:			
Address of Service:			Primary Number:
Mailing Address:			()
Address			Secondary Number:
City	State	Zip	

(Please read and initial each statement)

\_\_\_\_\_ I AGREE TO PAY A SECURITY DEPOSIT OF \$150.00 TO HAVE MY WATER SERVICE TURNED ON AND TO BEGIN A WATER, SEWER, AND TRASH UTILITY ACCOUNT IN MY NAME, LISTED ABOVE.

\_\_\_\_\_I UNDERSTAND UTILITY BILLS ARE DUE ON THE 1<sup>st</sup> OF THE MONTH AND DELINQUENT WITH A 10% PENALTY ON THE 6<sup>th</sup> OF THE MONTH. IF ACCOUNT IS DELIQUENT ON THE 16<sup>th</sup> OF THE MONTH, WATER SERVICE WILL BE SHUT OFF. WATER BILL PAYMENTS CAN BE MAILED, PAID AT CITY HALL OR DROPPED IN THE DROP BOX AT CITY HALL. CREDIT/DEBIT CARDS ARE ALSO ACCEPTED AT CITY HALL AND OVER THE PHONE BETWEEN THE HOURS OF 8:00AM – 4:00PM.

\_\_\_\_\_ I UNDERSTAND THAT THERE IS A \$50.00 RECONNECTION FEE IF MY WATER SERVICE IS SHUT OFF AND THAT MY SERVICE WILL NOT BE RECONNECTED UNTIL THE ACCOUNT IS PAID IN FULL, ALONG WITH THE RECONNECTION FEE.

\_\_\_\_\_ I UNDERSTAND THE WATER METER IS PROPERTY OF THE CITY AND SHALL NOT BE TAMPERED WITH. EVIDENCE OF TAMPERING WILL BE REPORTED TO THE POLICE RESULTING IN FURTHER LEGAL ACTION.

\_\_\_\_\_ I UNDERSTAND THAT MY DEPOSIT WILL BE REFUNDED TO ME ONLY AFTER ANY CURRENT AND PAST DUE BILLS ARE PAID IN FULL. IT IS ALSO MY RESPONSIBILITY TO NOTIFY CITY HALL PRIOR TO MOVING OUT SO A FINAL BILL CAN BE ISSUED. DEPOSITS WILL NOT BE REFUNDED UNTIL A FINAL READING CAN BE DONE AND A FINAL BILL IS GENERATED FOR THE ACCOUNT.

Signature

This portion is to be completed by city clerk

Date Paid:	Deposit Amount:	
	CC   CASH   MO #   CHECK #	
	Clerks Signature:	