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Date

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:			()		
			Secondary Number:		
Address			()		
City	State	Zip			
	(Please re	ead and initial ead	ch statement)		
	TO BEGIN A WATI		50.00 TO HAVE MY WATER SERVICE TRASH UTILITY ACCOUNT IN MY		
DELINQUENT WI' ON THE 16 th OF TH CAN BE MAILED	ΓΗ Α 10% PENALTY IE MONTH, WATER	ON THE 6 th OF THE SERVICE WILL I LL VIA CASH, C	ON THE 1st OF THE MONTH AND HE MONTH. IF ACCOUNT IS DELIQUENT BE SHUT OFF. WATER BILL PAYMENTS CHECK, MONEY ORDER, CREDIT/DEBIT LL.		
SERVICE IS SHUT		MY SERVICE WII	RECONNECTION FEE IF MY WATER LL NOT BE RECONNECTED UNTIL THE DNNECTION FEE.		
TAMPERED WIT		TAMPERING W	ERTY OF THE CITY AND SHALL NOT BE VILL BE REPORTED TO THE POLICE		
CURRENT AND PA	AST DUE BILLS AR LL PRIOR TO MOVI FUNDED UNTIL A F	E PAID IN FULL. ING OUT SO A FI	REFUNDED TO ME ONLY AFTER ANY IT IS ALSO MY RESPONSIBILITY TO NAL BILL CAN BE ISSUED. DEPOSITS CAN BE DONE AND A FINAL BILL IS		
			Authorized Signature		

This portion is to be completed by city clerk					
Date Paid:	Deposit Amount:				
	CC CASH MO # CHECK #				
	Clerks Signature:				