

Account No. _____

Effective Date _____

Town of DeMotte

Residential Customer Information

Primary Account Holder Information:

Name: _____
Last First Middle Initial

Address of Services: _____

Mailing Address *if different* than Service Address: _____

City/Town State Zip Code

Name of Employer: _____

Driver's License No: _____ Date of Birth: _____

Social Sec No: _____ Telephone No: (____) _____

Spouse or Other Account Holder Information:

Name: _____
Last First Middle Initial

Name & Address of Employer: _____

Driver's License No: _____ Date of Birth: _____

Social Security No: _____ Telephone No: (____) _____

Any person attempting to gain account information must be set up as an authorized user to receive any information regarding this account, including billing amounts, payment history, work orders, collection information, etc. Authorized users will not have the ability to connect, disconnect or alter service in any way. Only the account holder will be able to request changes.

List Authorized Users:

1. _____ 2. _____

Utilities Requested: Water: _____ Wastewater (Sewer): _____ Trash: _____

I have read the above information and duly attest that the above responses are true. I understand that misrepresentation or omission of any facts or information called for on this application is subject to any and all Town of DeMotte codes and/or ordinance(s). I understand that if such information is found to be false (fraudulent), the Town will be bound to resolve this matter in accordance to its policies, codes, and/or ordinances, which may include any necessary fees or fines. I agree to the minimum monthly charges and fees in accordance to the Town Ordinances.

If legal action is necessary to collect amounts due under this account, the undersigned consents to the jurisdiction of the Jasper County, Indiana courts.

Signature: _____

Signature: _____

***Water service has a minimum monthly charge for 4500 gallons of water.**

*** If a property has been signed up for water and it is not connected, there will be a minimum monthly charge as per the water contract.**

*** Wastewater & Trash have a fixed rate**

OFFICE USE ONLY

Date Entered in Keystone _____

Date Form Scanned & Attached to Account _____