

CITY OF UTE 130 E MAIN ST
P.O. BOX 255 UTE, IA 51060 712-885-2237

Water Request Form

Account _____

Date _____

Customer's Name _____

Phone _____

Requests water to be turned

[on – off] { circle one }

Deposit if required \$ _____

[paid – due] { circle one }

To Turn On: \$10.00 nonrefundable

If owner

\$110.00, \$10 nonrefundable

& \$100 refundable, if renter

To Turn Off: No Charge

Date Service Requested _____

Physical Location _____

Billing Address {include box no.

Or street address }

Reason: _____

Signature _____

ON ONLY:

Do you have a Pet? _____

You will need to license dogs and cats.

Last address you lived at

Did you have an Utility

Account? ____ yes or no

Office use only

(Do they need garbage can?)

Date completed _____

Meter reading _____

Completed by: _____

Comments:
