



208 W JEFFERSON ST, OSCEOLA, IA 50213
(641) 342-1435

APPLICATION FOR RESIDENTIAL UTILITY SERVICE

Address where service is requested _____

Billing Address (if different from above) _____

City _____ State _____ Zip _____

Homeowner Rent On Contract Landlord Name _____

Landlord Address _____ Landlord Phone _____

Number of People Living Here (OPTIONAL) _____

Service Request Date: _____

Billing Information:

Primary Account Holder Name _____

Date of Birth _____

Social Security # _____

Employer _____

Phone # _____

Secondary Account Holder Name _____

Date of Birth _____

Social Security # _____

Employer _____

Phone # _____

SIGNATURE OF ACCOUNT HOLDER: _____ **DATE:** _____

BY SIGNING ABOVE, I/WE HEREBY MAKE APPLICATION WITH OSCEOLA WATER WORKS FOR WATER, SEWER, AND GARBAGE/RECYCLING SERVICES. I/WE AGREE TO PAY THE UTILITY SERVICES SUPPLIED TO OSCEOLA WATER WORKS, 208 WEST JEFFERSON ST., OSCEOLA, IA 50213.

-----FOR OFFICE USE ONLY-----

Customer Account# _____

Read-In Date _____

Deposit Amount \$ _____

Meter Read: _____

Receipt #: _____

Meter ID: _____