

CITY OF CAMDENTON
 437 W. US Hwy 54
 Camdenton, MO 65020

Application for New Water/Sewer Service

*****BUSINESS*****



Date of Application _____ *Date Service Required* _____

Applicant Information

BUSINESS NAME

Name of Owner(s)

Telephone #

Service Address

Mailing Address (if different)

Business Telephone Number(s)

Email Address

EIN/FIN Number

State Tax ID:

Date of Incorporation

Copy of Articles of Incorporation/LLC Paperwork Received

_____ **Yes** _____ **No**

Prior Service Acknowledgement

Have you previously had water/sewer service with the City? _____ **Yes** _____ **No**

Privacy Acknowledgement

Do you want your name and address to be public record _____ *yes – okay to release to public inquiries*
 Do you request confidentiality? _____ *yes- do not release to public inquiries*

Manager Name/Telephone #

Number of Employees at this location

Property Information

Property Ownership (check one)

Property Owner _____ **Renter** _____
If Owner, is this rental property? _____ **yes** _____ **no** *Attach signed Utilities Agreement* _____ **yes** _____ **no**

Responsible Party Section

Acknowledgement (initial space to accept)

_____ If this account becomes delinquent, I/We agree to be responsible for all collection fees and/or attorney fees, plus any court costs incurred, with the collect of this account. *Per City Ordinance 2129-06*
 _____ Water will be turned on the date service is requested on this application. Applicant is responsible for either being at the structure when service is turned on, or have ensured that all water sources are off in the structure.

Applicant Signature

Date

*******FOR OFFICE USE ONLY*******

METER # _____ **DATE OF DEPOSIT** _____

DEPOSIT # _____ **DEPOSIT AMOUNT** _____

SEWER: _____ **YES** _____ **NO** **OUT OF CITY:** _____ **YES** _____ **NO** _____ **DEPOSIT DETERMINED FROM LIKE BUSINESSES**

_____ ******RESPONSIBLE PARTY SECTION INITIALED**

_____ **UTILITY AGREEMENT SIGNED & ATTACHED**

REVISED 09/2017