

SERVICE INFORMATION		* Required Items
* Today's Date	* Service Start Date	
* Service Address		
* Billing Address		
RESIDENTIAL SERVICE ONLY		
* Applicant Name	* Social Security Number	
* Phone Number	E-mail Address	
Co-Applicant Name	Social Security Number	
Phone Number	E-mail Address	
* Emergency Contact	* Phone Number	
* Recycling/Trash Service	_____ Single ~ \$14.00 _____ Family ~ \$15.00	
COMMERCIAL SERVICE ONLY		
* Applicant Name	* Position with Company	
* Type of Business	* Tax ID or Social Security Number	
* Phone Number	* E-mail	
* Emergency Contact	* Phone Number	
LANDLORD & RENTAL PROPERTY INFORMATION		
* Landlord Name		
* Landlord Mailing Address		
* Phone Number		

- The undersigned hereby makes application with the City of Garnavillo, Iowa for water, sewer and garbage services.
- The undersigned agrees to pay for all utility services supplied by the due date as provided on the bill.
- The undersigned agrees to complete a termination of service form complete with a forwarding address. Upon receipt of the notification the city will have services discontinued on the date requested if it is not a holiday or a weekend. If notification is not received the undersigned will remain responsible for all services.

Applicant Signature

Co-Applicant Signature