

TOWN OF CLOVERDALE UTILITY CUSTOMER AGREEMENT FORM

1. A \$200.00 dollar deposit is required upon application for service by all renters and contract buyers
2. The billing is sent on the 10th of each month. Bills are payable and DUE BY THE 25TH OF EACH MONTH. Any bill that is 30 days in arrears is due for disconnection. **All Property owners will be notified of delinquent utility bills.**
3. Upon necessity of shut off, service will be disconnected until the payment has been made in full including the late fee.
4. When service is disconnected for non-payment there will be an ADDITIONAL \$75.00 FEE to reconnect.
5. **The Town of Cloverdale reserves the right to collect delinquent utility bills by legal action.**
6. A new billing cycle starts at the beginning of the month. Meters are read the first day of the month. The billing cycle is a 30 day cycle. (EXCEPTION FOR STATE AND GOVERNMENT ACCOUNTS)
7. New Customer/starting service: FIRST BILL: If a new customer starts service 10 days or more before the end of the billing cycle, they will receive a bill for those days. If a customer starts service within 10 days or less of the new billing cycle, they will not receive a bill until the following month for their total consumption from their start date.
8. A customer ending service: FINAL BILL. If a customer ends service and a new billing cycle has started, they will receive a final bill for that cycle.

CUSTOMER INFORMATION--PLEASE PRINT CLEARLY

NAME: _____

PROPERTY ADDRESS: _____

BILLING ADDRESS: _____

PHONE NUMBER: _____

SOCIAL SECURITY NUMBER: _____

DATE OF BIRTH: _____

FEDERAL TAX ID NO (IF APPLICABLE): _____

EMPLOYER: _____

EMPLOYER ADDRESS: _____

EMPLOYER PHONE NUMBER: _____

PROPERTY OWNER NAME: _____

PROPERTY OWNER ADDRESS: _____

PROPERTY OWNER PHONE NUMBER: _____

I, the undersigned, acknowledges that he/she has read and understands the agreement and will abide by such.

DATE: _____

SIGNATURE: _____

OFFICE USE ONLY:

ACCOUNT # _____ BOOK _____ ROUTE 0 SEQ _____

READING _____ DATE _____ WATER _____ SEWER _____

DEPOSIT RECEIVED \$ _____ CASH _____ CHECK# _____ CC _____

RECEIPT # _____ FUND RECEIPT # _____ OWNER: NO DEPOSIT _____