VILLAGE OF TOLONO BUSINESS APPLICATION FOR UTILITY SERVICE

A PHOTO ID <u>MUST</u> BE PRESENTED WITH COMPLETED APPLICATION

<u>PLEASE PRINT CLEARLY</u>

	NAME					
	SERVICE ADDRESS(ES)					
BUSINESS INFROMATION	MAILING ADDRESS STREET/PO BOX	CITY	STATE ZIP			
	BUSINESS START DATE	FEIN OR TII	IN			
	PHONE NUMBER(S)/EXTENSIONS IF USED					
	EMAIL ADDRESS(ES)					
	DAYS AND HOURS OF OPERATION					
Z	NAME LAST FIRST M.I.					
NER OR MANAGER INFORMATION	DATE OF BIRTH	MARITAL STATUS				
	SOCIAL SECURITY NO	DRIVER'S LICENSE NO/STATE ID NO				
MANAG	PHONE NUMBERS HOME CELL					
	EMAIL ADDRESS					
MO	CAN YOU BE CONTACTED "AFTER HOURS" IN AN EMERGENCY? IF SO, WHAT NUMBER					
	HAVE YOU EVER HAD SERVICE WITH THE VILLAGE BEFORE?					
CREDIT	IF SO, WHEN & UNDER WHAT NAME(S)?					
CRE	HAVE YOU OR ANYONE LIVING AT THE RESIDENCE EVER HAD AN OUTSTANDING BALANCE TURNED OVER TO COLLECTIONS BY THE VILLAGE ?					
	IN THE EVENT OF AN EMERGENT DISCONNECTION (SEVERE LEAK, NON-PAYMENT, ETC) AND WE CAN'T REACH YOU, PLEASE LIST A RESPONSIBLE ADULT TO CONTACT					
ОТНЕК	NAME					
	TITLE		PHONE			

	I/WE HAVE INSPECTED THE PLUMBING AT THE SERVICE LOCATION(S) IN THIS APPLICATION FOR WHICH I/WE DESIRE					
SERVICE AGREEMENT	SERVICE, AND I/WE ATTEST THAT THE PLUMBING IS IN PROPER OPERATING CONDITION. I/WE AGREE TO BE RESPONSIBLE					
	FOR ALL WATER USED ON SAID PREMISES UNTIL I/WE NOTIFY VILLAGE HALL TO DISCONTINUE THE SERVICE. I/WE					
	FURTHER AGREE THAT THIS APPLICATION MAY BE ACTIVATED OR INACTIVATED ONLY BY THE APPLICANT(S), BY VERBAL					
ΙΞ̈́	OR WRITTEN REQUEST TO VILLAGE HALL.					
Ш	FOR THE SERVICE REQUESTED, I/WE AGREE TO PAY THE VILLAGE OF TOLONO AT ESTABLISHED INTERVALS AS STATED					
85	IN THE CODE OF ORDINANCES. I/WE ALSO AGREE TO COMPLY WITH THE VILLAGE'S RULES AND REGULATIONS AS					
ĕ	STATED IN THE CODE OF ORDINANCES AND THE WATER/SEWER BILLING POLICIES SET FORTH BY THE VILLAGE BOARD.					
빙	I/WE UNDERSTAND THAT FAILURE TO MAKE PAYMENT ON SUCH ACCOUNT AFTER TERMINATION OF SERVICE FOR					
I≅	ANY REASON SHALL BE CONSIDERED BREECH OF AGREEMENT, AND WILL RESULT IN THE IMMEDIATE RENDERING OF					
	THE ACCOUNT TO A COLLECTION AGENCY FOR PAYMENT IN FULL, FILING OF A LIEN AGAINST THE PROPERTY OR POSSIBLE					
l *,	LITIGATION. I/WE AGREE THAT IF THE ACCOUNT IS RENDERED FOR COLLECTION ACTION, I/WE WILL PAY ALL REASON-					
	•	E COLLECTION AND/OR LEGAL FEES. I/WE FURTHER AGREE THAT MY/OUR SERVICE DEPOSIT MAY BE RETAINED				
	AND APPLIED BY THE VILLAGE TO UNPAID UTILITY BILLS OR ANY INDEBTEDNESS WHATSOEVER TO THE VILLAGE.					
	I/WE HEREBY CERTIFY THAT:					
	1) WE HAVE READ AND UNDERSTAND THE ABOVE SERVICE AGREEMENT;					
	2) WE HAVE RECEIVED A COPY OF THE VILLAGE OF TOLONO WATER/SEWER BILLING POLICIES;					
z	3) THAT ALL INFORMATION PROVIDED HEREIN IS TRUE AND CORRECT.					
₽	SIGNED:	D	ATE:			
EXECUTION						
l ÿ	SIGNED:	D	ATE:			
ω	SIGILES!	-				
	ENADLOYEE MUTNIEGG		ATE CERVICE TO BE CTARTED.			
	EMPLOYEE WITNESS	D	ATE SERVICE TO BE STARTED:			
		DA CE USE ONL				
	FOR OFFI	CE USE ONL				
	FOR OFFI SERVICE ADDRESS:	CE USE ONL	.Y			
	FOR OFFI SERVICE ADDRESS:	CE USE ONL	RIOR BALANCE DUE: \$			
	FOR OFFI SERVICE ADDRESS: PRIOR DELINQUENT ACCOUNT: YES / NO DATE OF DEPOSIT:	PR METHOD OF F	RIOR BALANCE DUE: \$			
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	FOR OFFI SERVICE ADDRESS: PRIOR DELINQUENT ACCOUNT: YES / NO DATE OF DEPOSIT: RECEIPT NO:	PR METHOD OF F	PAYMENT: RY COMPLETED ON:			
	FOR OFFI SERVICE ADDRESS: PRIOR DELINQUENT ACCOUNT: YES / NO DATE OF DEPOSIT: RECEIPT NO: DEPOSIT APPLIED TO FINALED ACCOUNT: \$	PR METHOD OF F	RIOR BALANCE DUE: \$ PAYMENT: RY COMPLETED ON: DATE:			
	FOR OFFI SERVICE ADDRESS: PRIOR DELINQUENT ACCOUNT: YES / NO DATE OF DEPOSIT: RECEIPT NO:	PR METHOD OF F	PAYMENT: RY COMPLETED ON:			