## VILLAGE OF TOLONO <a href="#">RENTER</a> APPLICATION FOR UTILITY SERVICE

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

<u>PLEASE PRINT CLEARLY</u>

APPLICANT	NAME LAST	FIRST	M.I.		
	SERVICE ADDRESS STREET				
	MAILING ADDRESS STREET/PO BOX	CITY	STATE ZIP		
	DATE OF BIRTH	MARITAL STATUS			
	SOCIAL SECURITY NO	DRIVER'S LICENSE NO/STATE ID NO			
	PHONE NUMBERS HOME	CELL			
	EMAIL ADDRESS				
	EMPLOYER NAME, ADDRESS & PHONE NUM	PLOYER NAME, ADDRESS & PHONE NUMBER			
E)	NAME LAST	FIRST M.I.			
CO-APPLICANT (IF APPLICABLE)	DATE OF BIRTH	MARITAL STATUS			
IF APPI	SOCIAL SECURITY NO	DRIVER'S LICENSE NO/STATE ID NO			
ANT (I	PHONE NUMBERS HOME CELL				
APPLIC	EMAIL ADDRESS				
OS G	EMPLOYER NAME, ADDRESS & PHONE NUMBER		YEARS EMPLOYED		
	PRIOR LANDLORD NAME, ADDRESS & PHONE NUMBER		YEARS RENTED FROM		
] N¥	PRIOR WATER COMPANY NAME & PHONE NUMBER		YEARS OF SERVICE		
CREDIT HISTORY	HAVE YOU OR ANYONE LIVING AT THE RESIDENCE HAD SERVICE WITH THE VILLAGE BEFORE?				
CREDIT	IF SO, WHEN & UNDER WHAT NAME(S)?				
_	HAVE YOU OR ANYONE LIVING AT THE RESIDENCE EVER HAD AN OUTSTANDING BALANCE				
	TURNED OVER TO COLLECTIONS BY THE VILLAGE ?				
IER	IN THE EVENT OF AN EMERGENT DISCONNECTION (SEVERE LEAK, NON-PAYMENT, ETC), PLEASE LIST A RESPONSIBLE ADULT TO CONTACT				
OTHER	NAME	PHONE			

	NAME(S) AND AGE(S) OF ALL PERSONS WHO WILL RESIDE AT THIS ADDRESS:							
RESIDENCY	<u>NAME</u> <u>AGE</u>		NAME	<u>AGE</u>				
		-						
		_						
2		-						
	<u> </u>	_						
	CONTACT INFORMATION FOR CURRENT PROPERTY OWNER:							
	NAME AND MAILING ADDRESS							
~								
Ņ	PHONE NUMBERS HOME	CELL	EMAIL					
ANDOWNER-								
Š	I AM AWARE THAT, AS THE PROPERTY OWNER, I AM	I JOINTLY LIABL	E FOR ANY UNPAID DEBTS THAT THIS	TENANT MAY				
Ι	INCURR PER THE VILLAGE ORDINANCE. I AGREE THAT THIS PERSON MAY OBTAIN WATER/SEWER SERVICE AT THIS							
	ADDRESS. I ATTEST THAT THE PLUMBING AT THIS ADDRESS IS IN PROPER OPERATING CONDITION.							
	SIGNED:		DATE:					
ΤΙ	I/WE HAVE INSPECTED THE PLUMBING AT THE							
	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							
	OR WRITTEN REQUEST TO VILLAGE HALL.							
1EL	FOR THE SERVICE REQUESTED, I/WE AGREE TO PAY THE VILLAGE OF TOLONO AT ESTABLISHED INTERVALS AS STATED							
E	IN THE CODE OF ORDINANCES. I/WE ALSO AGREE T STATED IN THE CODE OF ORDINANCES AND THE WA							
GRI	I/WE UNDERSTAND THAT FAILURE TO MAKE PAY	· ·						
Ϋ́	ANY REASON SHALL BE CONSIDERED BREECH OF AG							
SERVICE AGREEMENT	THE ACCOUNT TO A COLLECTION AGENCY FOR PAYMENT IN FULL OR POSSIBLE LITIGATION. I/WE AGREE THAT IF THE							
ER.	ACCOUNT IS RENDERED FOR COLLECTION ACTION, I/WE WILL PAY ALL REASONABLE COLLECTION AND/OR LEGAL FEES.							
S	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 UNDERSTAND THAT VILLAGE ORDINANCES PROVIDE THAT UNPAID BILLS ARE LIENS AGAINST THE REAL							
	ESTATE SERVICED, AND HEREBY AUTHORIZE THE VILLAGE OF TOLONO TO SEND THE PROPERTY OWNER COPIES							
	OF THIS APPLICATION, NOTICES OF ANY DELINQUENT BILLINGS AND COLLECTION NOTICES.							
	I/WE HEREBY CERTIFY THAT:							
	1) WE HAVE READ AND UNDERSTA							
	2) WE HAVE RECEIVED A COPY OF THE VILLAGE OF TOLONO WATER/SEWER BILLING POLICIES;							
NO	3) THAT ALL INFORMATION PROVI	DED HEREIN IS						
EXECUTION	SIGNED:		DATE:					
EX	SIGNED:		DATE:					
	EMPLOYEE WITNESS							
			DATE SERVICE TO BE STARTE	D:				
	FOR OFFICE USE ONLY							
	FOR OFF	FICE USE O		D:				
	FOR OFF	FICE USE O		D:				
				D:				
	SERVICE ADDRESS:		NLY	D:				
	SERVICE ADDRESS: PRIOR DELINQUENT ACCOUNT: YES / NO		NLY PRIOR BALANCE DUE: \$	D:				
	SERVICE ADDRESS: PRIOR DELINQUENT ACCOUNT: YES / NO DATE OF DEPOSIT:	METHOD (	PRIOR BALANCE DUE: \$	D:				
	SERVICE ADDRESS: PRIOR DELINQUENT ACCOUNT: YES / NO	METHOD (	NLY PRIOR BALANCE DUE: \$	D:				
	SERVICE ADDRESS: PRIOR DELINQUENT ACCOUNT: YES / NO DATE OF DEPOSIT: RECEIPT NO:	METHOD C	PRIOR BALANCE DUE: \$  OF PAYMENT: NTRY COMPLETED ON:	D:				
	SERVICE ADDRESS: PRIOR DELINQUENT ACCOUNT: YES / NO  DATE OF DEPOSIT: RECEIPT NO:  DEPOSIT APPLIED TO FINALED ACCOUNT: \$	METHOD C	PRIOR BALANCE DUE: \$  OF PAYMENT: NTRY COMPLETED ON:  DATE:	D:				
	SERVICE ADDRESS: PRIOR DELINQUENT ACCOUNT: YES / NO DATE OF DEPOSIT: RECEIPT NO:	METHOD C	PRIOR BALANCE DUE: \$  OF PAYMENT: NTRY COMPLETED ON:	D:				