

# UTILITY SERVICE APPLICATION

City of North Newton ♦ 2601 N Main ♦ PO Box 87 ♦ North Newton, KS 67117  
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THE CITY OF NORTH NEWTON, at the request of the undersigned, will supply utility services as specified by the Governing Body of North Newton for use at

\_\_\_\_\_ as of \_\_\_\_\_  
SERVICE ADDRESS EFFECTIVE DATE, SUCH AS CLOSING DATE OR LEASE DATE

- Owner of this residence
- Tenant of this residence Landlord is \_\_\_\_\_ Phone # \_\_\_\_\_

### THE UNDERSIGNED HEREBY AGREES (initial each after reading):

- \_\_\_\_\_ To pay for all Water, Sewer, Solid Waste, and Recycling Services supplied to occupant at said premises.
- \_\_\_\_\_ To pay any balance due on accounts previously rendered to him as a customer of said City.
- \_\_\_\_\_ To pay a **\$30.00** account setup fee upon establishing service.
- \_\_\_\_\_ To pay a **\$50.00** security deposit (renters only) upon establishing service as required by City Ordinance.
- \_\_\_\_\_ To notify the City in advance of moving out. (Renters get their deposit credited back to the final bill.)

*(Please print clearly and fill out completely. You will be required to show a driver's license or photo ID.)*

Name On Bill: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
LAST FIRST MIDDLE SUFFIX

Billing Address (if different than svc address): \_\_\_\_\_

Home Telephone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Social Security #\*: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Current Employer & Address: \_\_\_\_\_

Work Telephone #: \_\_\_\_\_

Previous Employer if within 3 years: \_\_\_\_\_

Other Adult: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
LAST FIRST MIDDLE SUFFIX

Cell Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Social Security #\*: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Current Employer & Address: \_\_\_\_\_

Work Telephone #: \_\_\_\_\_

Emergency Contact Person (other than yourselves): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Numbers: \_\_\_\_\_ Relationship: \_\_\_\_\_

Previous addresses in past 3 years: \_\_\_\_\_

Do you have pet cat(s) and/or dog(s)? Yes  No  (North Newton pet tags required with proof of rabies shots.)

Number of people to be living at this address: \_\_\_\_\_

Customer Signature \_\_\_\_\_ Date \_\_\_\_\_

Owner or Tenant shall conform to rules and regulations established by the Governing body of the City of North Newton, Kansas.  
\* - City governments are allowed by law to request Social Security numbers (5 USC §522a), although it is optional. Information is confidential and kept secure. Information is used in the event that collection action is necessary.

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**OFFICE USE ONLY:** Account # \_\_\_\_\_ Meter Reading \_\_\_\_\_ Reading Date \_\_\_\_\_