

APPLICATION FOR SERVICE LAKE CITY UTILITY BOARD

Application is hereby made by the undersigned for Utility Service as indicated below at the following address: _____

Date service to begin: _____

Billing Name: Last Name _____ First Name _____

Phone Number: _____ Email Address _____

Spouse/2nd Billing Name: Last Name _____ First Name _____

Is this a seasonal home? ____ Yes ____ No

If yes, where would you like your bills mailed? _____
Street address

City _____ State _____ Zip _____

Last Address _____ City _____ State _____ Years _____

Social Security Number (Used for Revenue Recapture Purposes)

Do you ____ own or ____ rent the property for which you are applying for service?

If you are renting, list the name and address of owner: _____

I/We hereby agree to pay all charges, as provided by present rates and regulations and any future amendments thereto, and agree to use and continue such service until a written request is filed discontinuing the same at the office of the Lake City Utility Board. We also agree that the Public Works Director, or authorized employee of the Department, shall have access to the above property for inspection of meters or any Utility Department facilities at any reasonable hour.

Applicant _____

Date _____

Deposit _____

Transfer fee _____

TOTAL _____

DEPOSIT IS REFUNDABLE IN ONE YEAR WITH INTEREST IF PAYMENTS ARE NOT LATE MORE THAN ONCE. IF MORE THAN ONE PAYMENT IS PAID LATE, THE DEPOSIT WILL BE HELD UNTIL A FULL YEAR HAS PASSED WITHOUT A LATE PAYMENT MORE THAN ONCE.

TENNESSEN WARNING

You are being asked to provide the City with your social security number on the attached Application for Utility Service. Your social security number is private data pursuant to Minnesota Statutes Section 13.355. Private data is information which generally cannot be given to the public but can be given to the subject of the data.

The reason that the City is requesting that you provide it with your social security number is to allow the City to be able to file a claim with the Minnesota Department of Revenue in order to recapture any delinquent utility amounts through tax refunds. The City will only take this action in the event that your utility account becomes delinquent and it does not receive payment from you.

In the event that the City needs to file a claim, your social security number will only be provided to the Minnesota Department of Revenue. It will not be provided to any other government agencies or third parties. You are not required to supply this information and you may still receive utility services in the event that you do not provide it.

Name

Date