



Water                       Sanitary Sewer

Service Address: \_\_\_\_\_ Date Service to Begin: \_\_\_\_\_

Business Name: \_\_\_\_\_ EIN #: \_\_\_\_\_

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

Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**ONE ACCOUNT REPRESENTATIVE MUST PROVIDE PHOTO ID\* UPON APPLICATION**

**Primary Account Rep:** \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Local Account Rep:** \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Landlord's Name:** \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

How would you like to receive your bills?

- Paperless (via email address above)  
 Printed and mailed  
 Both email and paper

Would you like to receive the City's newsletter via email?

- Yes  
 No

The undersigned understands that they are entering into a contract for utility service with the City of Edgerton, and understands that all persons, firms or corporations having connection with the City's water and sewer system shall pay any applicable deposit, monthly usage and service charges.

The undersigned agrees to make no claims against the City of Edgerton for damage on account of the stoppage of the flow of water resulting from an accidental shut-off by the City of Edgerton, or when stoppage is necessary to make alterations, repairs or improvements by the City of Edgerton or its agents, representatives and/or contractors. The undersigned shall keep all plumbing fixtures on its premises in good repair, shall promptly stop all leaks from such plumbing fixtures and shall conserve water in time of water shortage.

The undersigned agrees to abide by the City of Edgerton Cross Connection Ordinance (15-109).

The undersigned agrees that if the bills or charges submitted by the City of Edgerton are not paid by the service interruption date of the following month, the water service will be terminated (Ordinances 15-121, 15-123). The following provisions regarding non-payment will be applied as part of this contract.

- a. That a penalty will be assessed against the non-paying customer on the amount due the City of Edgerton on the date indicated on the bill.
- b. That service interruption notices will be sent out to the Customer by the City of Edgerton by regular mail.
- c. That upon Customer's non-payment of a utility bill by the interruption date, water service will be disconnected by the City of Edgerton.
- d. That water service will be reconnected by the City of Edgerton upon payment of the utility bill and the service charge by Customer.

vs. 01.03.24

All returned checks, including returned web payments, which were applied to water accounts, will result in water disconnection if not paid within the allotted time after notification. A service charge and a returned check charge will also be assessed.

I have read and understand the Terms and Conditions of receiving water service from the City of Edgerton and agree to abide by the same.

I hereby affirm and verify under penalty of law that I am the individual named and the EIN number provided herein is the true correct EIN number, assigned by the federal government.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
*(Account Representative)*

Providing false information is a violation of laws both Kansas (K.S.A § 21-3711) and the Federal Government (18 U.S.C. § 1001).

\*Acceptable photo ID's are: State Driver's License, Passports, State ID Cards issued by the State DMV and Native Tribe ID Cards.

**FOR OFFICE USE ONLY**

Account # \_\_\_\_\_ Read Date Used: \_\_\_\_\_

Service Fee Required \$ \_\_\_\_\_

Water  Sewer  Add. \_\_\_\_\_

Received By: \_\_\_\_\_ Date Received: \_\_\_\_\_

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_