

City of Festus – Customer Water Account Application

(Office Use Only)

Account Number _____ Own/Rent _____ Deposit Amount _____ Date _____

PLEASE PRINT – All fields MUST be completed or use “N/A” when applicable

Applicant First Name _____ Last Name _____

Date of Birth _____ SSN _____

Address _____ Driver’s License Number _____

Billing Address (If Different) _____

Home Phone _____ Cell Phone _____

Work Phone _____ Place of Employment _____

Employment Address _____

Email Address _____

Co-Applicant First Name _____ Last Name _____

Date of Birth _____ SSN _____

Address _____ Driver’s License Number _____

Home Phone _____ Cell Phone _____

Work Phone _____ Place of Employment _____

Employment Address _____

If renting, the Property Owner’s information is required below to initiate water/sewer/trash services:

Property Owner’s Name _____ Phone Number _____

Address _____

Bills are due on the 15th of the month. Delinquent bills are subject to disconnect on the 1st of the following month.

In the event of default, you agree to pay for all reasonable services incurred to collect the charges for services rendered by the City of Festus, which may include the following: all reasonable attorney fees, court costs and collection services. These service fees could range from 10-30% in addition to the outstanding balance due.

You agree, in order for us to service your account or to collect any amount you may owe, our city’s representatives and the representatives of our debt collections agency may contact you by telephone at any number associated with your account, including wireless telephone numbers, which could result in charges to you. Our city’s representatives and the representatives of our debt collections agency may contact you by sending text messages or emails using any email address you provide to us. Methods of contact may include using prerecorded/artificial voice messages and/or use of an auto-dialing device as applicable.

It shall be the responsibility of the resident to notify the City upon departure from location to finalize the account. The first date of notification will be used. In the event that the resident fails to notify the City, the first notification of any new resident start date shall be used for the final of the previous person.

By signing, you are agreeing that you (both, if applicable) have read this disclosure and agree that our city’s representatives and the representatives of our debt collections agency may contact you (both) as described above. As well, you are acknowledging that you understand that if you or an appointed person is NOT present at the scheduled time for water turn on, it shall NOT be rescheduled until the following working day.

NOTE: If there is a co-applicant, both must sign.

Applicant Signature

Date

Co-applicant Signature

Date

Name

Customer Number