

**CITY OF EGAN
101 N Irvin Street
Egan, SD 57024
(605 997-2274**

UTILITY ACCOUNT APPLICATION

Applicant agrees to pay for water, sewer and solid waste service at the established rates and consents to all the rules, regulations and rates contained in the resolutions or ordinances of the Municipality and modifications thereof, and to all new rules, regulations or rates duly adopted. These documents are available for review at the City Office during regular business hours. **On all monthly accounts with the City of Egan for water service, payment for that services is due by 5:00 p.m. CST on the 10th of the month. Customers who have not made payment by the 10th will be assessed a \$4.00 late fee. Non-payment by the 20th of the month will result in the customer being delinquent and the water may be turned off without further notice. Past due reminders will not be sent out. If the bill is not paid by the 20th it will be considered delinquent and water services may be shut off without further notice. All monthly accounts will either have made payment or may have been disconnected prior to the next billing cycle. Service will be restored when full payment on all accounts, plus any additional penalties collectable as a result of non-payment, is received. In addition to any outstanding bills for water, garbage or sewer services, fee of \$35.00 may be assessed to the consumer in the event city personnel must make a collection trip. The \$35.00 will be increased to \$75.00 if the water must be turned off for non-payment. Service disconnected for non-payment will be reconnected only after all bills are paid in full including service charges. A deposit of \$135.00 is required for all new accounts before water will be turned on.**

APPLICANT INFORMATION

Name _____ DL# _____

Name _____ DL# _____

Service Address _____

Mailing Address _____

Telephone Numbers

Home _____ Cell _____ Work _____

Employment _____

Previous Mailing Address: _____

IF RENTING PLEASE COMPLETE:

Name, Address & Phone Number of Landlord: _____

X _____ X _____
Applicant Signature Date

OFFICE USE:

Meter Serial No. _____

Account No. _____

Date of Hook-up _____

Deposit – Date Pd: _____

Amount: _____

Date Refunded _____

Amount: _____