

CITY OF HECTOR

APPLICATION FOR WATER/SEWER SERVICE

Type of Property: Residential Commercial

Property Status: Rental Owner Occupied

Move in Date: _____

First and Last Name: _____

Property Address: _____

Mailing Address: _____

Driver's License No. & State: _____

Home Phone No.: _____ Cell Phone No.: _____

No. of Person in Household: _____ Heat Source: _____

Place of Employment: _____

Work Phone No.: _____

Spouse (if applicable)

Name: _____

Driver's License No. & State: _____

Cell Phone No.: _____

Place of Employment: _____

Work Phone No.: _____

For Rental Properties Only:

Name of Owner: _____

Address of Owner: _____

Phone No. of Owner: _____

I HEREBY STATE THAT THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE.

Signature

Date

SERVICE CONTRACT WITH THE CITY OF HECTOR

The said applicant hereby applies for water/sewer services from the City of Hector, and the applicant and the City agree as follows:

1. When the City makes services available to the Applicant, the Applicant agrees to purchase from the City and pay, or cause to be paid, monthly to the City for all services used on the premises now owned or occupied by the Applicant in accordance with the rate schedule and rules and regulations established by the City. Payment must be paid in full by the 1st of each month. If payment is not made by the 1st of each month a penalty of 10% will be added to the unpaid balance. If payment is not made, services will be disconnected. If services have been terminated, Applicant must make payment in full including the disconnection fee of \$75.00 and reconnect fee of \$75.00 on the account prior to services being re-established the next business day except if the reconnect occurs after 5:00 pm, weekends, or holidays, the fee will be \$150.00.

2. The Applicant will comply with and be bound by such rules and regulations as adopted by the City from time to time.

3. The acceptance of this application by the City shall constitute an agreement between the Applicant and the City and the contract for service will continue in force from the date of service is made available by the City to the Applicant, and hereafter until cancelled by notice.

Office Use Only

Account No.: _____

The City of Hector is an Equal Opportunity Provider and Employer

“The following information is requested by the Federal Government in order to monitor compliance with the Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this, but are encourage to do so. This information will not be used in evaluation your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note race/national origin of individual applicants on the basis of visual observation or surname.”

If you feel you have been discriminated against: To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue SW, Washington, DC 20250-9410 or call (202) 720-5964 (voice and TTD).

APPLICANT DATA RECORD

Please provide the following information so that the City of Hector will be in compliance with Title VI of the Civil Rights Act of 1964.

In order to meet the requirements of the Federal Register Vol. 62 No. 210, Revision to the Standards for the Classification of Federal Data on Race Ethnicity, all application forms for the city utility connections must include below the signature and date block the following disclosure statements.

Please check the appropriate information below:

Racial Categories

- American Indian or Alaskan Native
- Asian
- Black or African American
- Caucasian/White
- Native Hawaiian or Pacific Islander

Ethnic Categories

- Hispanic or Latino
- Not Hispanic or Latino

Gender: Male Female

Signature

Date