



City of Hartington

P.O. Box 427 | 107 W. State St
Hartington, NE 68739
Phone: (402) 254-6353

APPLICATION FOR UTILITY SERVICES

DATE OF APPLICATION: _____ START DATE FOR SERVICE: _____

NAME: _____ SSN: _____

SPOUSE/OTHER APPLICANT: _____ SSN: _____

SERVICE ADDRESS: _____ MAILING ADDRESS: _____

If different then service address

PHONE NUMBERS: _____

EMAIL: _____

IF RENT - LANDLORD NAME: _____ LANDLORD PHONE NUMBER: _____

ACH PAYMENT: YES or NO PAPERLESS BILING? YES or NO HARTINGTON HELPS: OPT IN or OPT OUT

PREVIOUS ADDRESS: _____

In consideration for receiving water, sewer, and/or garbage services from the City of Hartington, Nebraska, at the service address listed above, I hereby acknowledge and accept responsibility for payment of all utility billings associated with this account.

A water deposit of \$100.00 and a garbage container deposit of \$70.00 are required prior to the initiation of service. Utility accounts are billed on a monthly basis, and payment must be received by the due date indicated on the billing statement to avoid interruption of service.

It is the customer's responsibility to notify the City Office of all service start and end dates. Upon termination of service, deposits will be refunded after the final bill has been paid in full and the garbage container has been returned.

The City of Hartington shall not be held liable for any water damage to the property or its contents.

I further authorize the release of my utility account information to the property owner, if different from myself.

I understand and acknowledge that a utility lien may be placed on the property for any delinquent water, sewer, and garbage charges.

SIGNATURE: _____ DATE: _____

SIGNATURE: _____ DATE: _____

FOR OFFICE USE ONLY

Deposit Received: _____ CASH/CHECK/CREDIT/TRANSFERRED (ACT # _____)

ACCOUNT NUMBER: _____ Copy of Photo Identification YES or NO CAN # _____

City Employee's Signature: _____ DATE: _____

The City of Hartington does not discriminate on the basis of race, color, national origin, age, or handicap in any of our programs or activities.