



CITY OF MOTLEY UTILITY SERVICE

Application for Service

APPLICANTS COMPLETE THIS SECTION (please print):

Name: _____
Last First

Name: _____
Last First

Address of Service: _____

Mailing Address and/or PO Box (if different than above):

Address City State Zip

Telephone: _____ **Email:** _____

Service Requested:

☐ New Resident ☐ Reconnect Water ☐ Service Shut-off

For new residents- Delivery of Bill Card: ☐ Mail ☐ E-mail

Date Service Requested: _____

Do you have a dog or cat? (Dogs and cats must be licensed annually):

☐ Yes ☐ No

Garbage Can Size: ☐ 32 gallon ☐ 64 gallon ☐ 96 gallon

**Please note, City Ordinance requires that all citizens within city limits MUST have garbage and recycling service through the City.*

I am the: ☐ Owner ☐ Renter

If renter:

Owner's Name: _____

Owner's Mailing Address: _____

Owner's Phone Number: _____

We now have autopay! If you are interested, please request an autopayment form.

I hereby affirm that all information provided is true and correct to the best of my knowledge. By signing this document I declare that I understand the following:

If your bill is not paid on or before the due date, penalty fees will be added to your account and a second bill will be mailed containing a cutoff notice. If the bill is not paid within ten days of the mailing of the second bill, service **WILL BE** discontinued for nonpayment.

Per City Ordinance **§ 54.03**, it is the policy of the City to discontinue utility service to customers by reason of nonpayment of bills only after notice and a meaningful opportunity to be heard on disputed bills. You may contact the Clerk-Treasurer at 218-352-6200 and request a hearing on this matter if you believe the amount stated on your bill is not actually due and unpaid. Requests for delays, payment plans, or waivers of payment will not be entertained at this hearing; only questions of proper and correct billing will be considered.

Unpaid utility charges constitute a lien against the property, and if there are any overdue outstanding charges on October 31 they will be certified to the County for collection with property taxes.

Applicant Signature

Date

Co-applicant Signature

Date

FOR CITY OFFICE USE

Meter Reading: _____		Date of Reading: _____	
<input type="checkbox"/>	Identification Verified	_____ City Hall Employee Signature	