



City of  
**SUMMERSET**  
A GREAT PLACE TO CALL HOME

**CITY UTILITY APPLICATION**  
**TRASH COLLECTION SERVICE & SEWER/WASTEWATER SERVICE**

**General Information (Please Print)**

Move in Date: \_\_\_\_\_

Customer Name \_\_\_\_\_ Phone # \_\_\_\_\_

Business Name if applicable \_\_\_\_\_ Business FEIN# \_\_\_\_\_

- Spouse
- Significant Other
- Roommate \_\_\_\_\_ Phone # \_\_\_\_\_

Service Address \_\_\_\_\_

Mailing Address \_\_\_\_\_  Same as above

- Yes! Paperless Billing (E-billing)
- Yes! Text for alerts

Email for E-billing \_\_\_\_\_ Phone # \_\_\_\_\_

I am the  Owner  Agent  Tenant (if you are renting, please complete the following)

Name of Property Owner/Landlord \_\_\_\_\_ Landlord's Phone \_\_\_\_\_

Landlord's Address \_\_\_\_\_ Landlord's Email \_\_\_\_\_

**Deposit:**

A deposit is required for all customers (see fee schedule). This deposit will be held by the City until the account is closed. If the account is current at the time of closing, the deposit will be refunded to the customer upon approval of the claim by the City Commission. **If there is a balance on the account, this deposit will be applied to the outstanding balance.** A \$15 late fee will be assessed to your account each month payment is not received by the due date. A \$30 return check fee will apply.

Fee Schedule:	
<input type="checkbox"/> Commercial Account	\$100
<input type="checkbox"/> Residential Owner Account	\$50
<input type="checkbox"/> Residential Rental Account	\$100

**Acknowledgement:**

I have read and understand the above billing process summary.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE ONLY**

Amount of Deposit _____	Date Paid _____	Payment Type: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Card
Account Changes/Disconnect:		
Forwarding Address _____	Effective Date _____	
Notes: _____		