

City of Sully
318 6th Avenue P.O. Box 247
Sully, Iowa 50251
(641) 594-3493
sullycty@netins.net

Application for Utility Services – Residential

Start Service Date _____ Connection Fee: \$75

Service Address _____

Billing Address _____

Own ___ Rent ___ Name of Landlord _____

Name (First Occupant) _____ SSN # _____

Home/Cell Phone _____ E-mail _____

Employer _____ Employer's Phone _____

Name (Second Occupant) _____ SSN # _____

Home/Cell Phone _____ E-mail _____

Employer _____ Employer's Phone _____

I hereby apply for utility services, for the premises listed above, pursuant to the rules and regulations of the City of Sully. I acknowledge that all statements given above are honest and accurate to the best of my knowledge. I agree to pay all bills rendered by the City of Sully until I give written notice to the City of Sully to discontinue said utility services. I understand that I will not be allowed utility service at a new Sully address if I am delinquent at a previous Sully address until the previous bill is paid in full. Upon termination of services you will have 30 days to pay final bill. If payment is not received in full you will receive notification that your account will be turned over to the State of Iowa's Offset Program for collection.

Applicant Signature _____ Date _____

Co-Applicant Signature _____ Date _____