

TOOELE CITY CORPORATION METER DEPOSIT RECORD

SHADED AREA MUST BE COMPLETE TO OBTAIN SERVICE

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LOCATION		METER NO.	RT#	SEQ#	CAN NO.	
CUSTOMER NAME				CUST. I.D.		
MAILING ADDRESS				EMPLOYER NAME		
HOME PHONE		DOB		WORK PHONE		
SSN#				DL#		
BEGINNING METER RDG.		SER ORD WRITTEN		DATE		CLOSING METER RDG.
SER ORD WRITTEN		DATE		CLOSING METER RDG.		SER ORD WRITTEN
DATE		DATE		DATE		DATE
DATE INITIATED	BY WHOM	DEPOSIT	RECEIPT NO.	DATE CLOSED	BY WHOM	APPLIED
<p>I do hereby make application for Tooele City municipal services for the address noted hereon. I do unconditionally agree to be responsible to Tooele City for payment of municipal service (e.g. water, sewer, garbage, storm water) furnished to said premises; and to continue this agreement in full force until I terminate this authority in writing. The undersigned agrees, whether he or she signs as customer or responsible party, that in consideration of the services to be rendered to the customer, he or she hereby individually obligates himself or herself to pay the account in accordance with the regular rates and terms should the account be referred to an attorney or collection agency, the undersigned shall pay all costs of collecting, including attorney fees, court costs, including charges and collection agency fees up to 35% of the balance assigned, not to exceed \$5,000 with or without suit.</p>						
<p align="center">_____ Initiating Signature</p>				<p align="center">_____ Closing Signature</p>		

JURAT

State of _____
 County of _____

Subscribed and sworn/affirmed to before me this
 _____ day of _____, 20____, by

 Notary Public
 My Commission Expires: _____