



BURLINGTON MUNICIPAL WATERWORKS

PO BOX 786
BURLINGTON, IA 52601
(319) 754-6501

New Service Form

Account Holder Information:

* Today's Date:	<input type="text"/>
	mm/dd/yy

*Acct. No.:	(For Office Use Only)
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* Service Address:	<input type="text"/>
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* Name on Acct:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Last Name	First Name	Middle Initial	Suffix
	<input type="text"/>			
	Business Name			

* Mailing Address:	<input type="text"/>
	Street Address
	<input type="text"/>
	City, State, Zip

*Additional Access to Account	<input type="text"/>
	Name of Individual

* Phone No:	<input type="text"/>
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* DL# / Tax ID#	<input type="text"/>
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* Social Sec #:	<input type="text"/>
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* Alternate Phone:	<input type="text"/>
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* Email Address:	<input type="text"/>
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* Service Start Date:	<input type="text"/>
	mm/dd/yy

(For Office Use Only)
<u>CALCULATION:</u>
_____ INCODE <u>OR</u> Manual Adj
_____ Bill to print in INCODE
*Turn On Time: _____

By signing my name below, I agree to comply with the rules and regulations of the Burlington Municipal Waterworks and to pay charges due for water, sewer, storm water, trash, and miscellaneous charges at the above premises.

* Signature:	<input type="text"/>
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*Date:	<input type="text"/>
	mm/dd/yy

(For Office Use Only)																							
* Billing Information:	<table border="1"> <tr> <td>_____</td> <td>Date of last inspection _____</td> </tr> <tr> <td>_____</td> <td>If older than 3 yrs, schedule inspection</td> </tr> <tr> <td>_____</td> <td>Check for old bills or bad debts (UB & A/R)</td> </tr> <tr> <td>_____</td> <td>Check Commercial Accts ERU</td> </tr> <tr> <td>_____</td> <td>Circle & place amount of t/on fee, if any?</td> </tr> <tr> <td>_____</td> <td>Set up turn on time on calendar</td> </tr> <tr> <td>_____</td> <td>Trash flyer given & explained, if needed</td> </tr> <tr> <td>_____</td> <td>Turn off account processed</td> </tr> <tr> <td>_____</td> <td>Service orders entered in system</td> </tr> <tr> <td>_____</td> <td>Account status = ACTIVE when done</td> </tr> <tr> <td>_____</td> <td>(only one acct at an address s/b ACTIVE)</td> </tr> </table>	_____	Date of last inspection _____	_____	If older than 3 yrs, schedule inspection	_____	Check for old bills or bad debts (UB & A/R)	_____	Check Commercial Accts ERU	_____	Circle & place amount of t/on fee, if any?	_____	Set up turn on time on calendar	_____	Trash flyer given & explained, if needed	_____	Turn off account processed	_____	Service orders entered in system	_____	Account status = ACTIVE when done	_____	(only one acct at an address s/b ACTIVE)
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Turn/On Fee:	_____																						
Meter Rent:	_____																						
Bad Debt:	_____																						
TOTAL:	_____																						