

## CITY OF MADISONVILLE UTILITY SERVICE AGREEMENT

## WATER SEWER GARBAGE

Date

1.	1. Tagree to pay for available utility services furnished by the Cit	y of Madisonville at the requested location(s), at the rates established by			
	the City Council of the City of Madisonville.				
2.	2. I agree to pay for all utility services delivered by the City to the notice to discontinue service.	I agree to pay for all utility services delivered by the City to the described location until I give the City written notice to discontinue service.			
3.	I agree that the described location will be used for single/ multi-family residential or business purposes only and the utility services will be used only by the occupants of the described location.				
4.	4. I agree to permit the City to discontinue water, sewer and /or receive City Utility services if I fail to pay for the utility service the City may refuse service at a new location if I am delinquer	s provide to me by the City. Further, I agree that			
5.	<ol> <li>I agree to abide by and consider as part of the contract any or concerning utility service. I agree to keep all plumbing and plu I agree to promptly stop leaks.</li> </ol>	, ,			
6.	. I grant the City the right to access the meters whenever necessary. I acknowledge that the meters, antennas, and utility boxes are the property of the City and that only City Utility employees can adjust or repair the equipment. I understand that if I, or any member of the household, turn the meter on or off, the action is considered meter tampering which is a citation for a fine for five hundred (500) dollars. I also understand that there is damage to the water meter, antennae, or box, I am responsible for repair and/or replacement costs.				
7.	I understand that the Poly Carts are the property of Waste Connections (City's vendor for solid waste collection and are provided for the use of the resident(s) at the address assigned. Charges for damage or removal of thes containers will be assessed to the utility bill. I understand that I am responsible for the poly cart(s) assigned to the above address.				
8.	8. If there is a dispute concerning billing, I acknowledge that I had Manager at 210 W Cottonwood, Madisonville, Texas 77864.	-			
	Printed Name Sign	ature			

## CITY OF MADISONVILLE COMMERCIAL UTILITY SERVICE APPLICATION FAX 936-348-3815 <u>LISA.FLORES@CI.MADISONVILLE.TX.US</u>

## **DEPOSIT INFORMATION**

Commercial: \$ 100 Activation Fee: \$ 30		Account Number:			
FILL IN ALL INFORMATION BELOW:  Name of Company		Date:Type of Business			
					Physical Address:
Email Address:					
Owner:		Phone No:			
Own: Rent:	Landlord:	Addr	ess:		
Mail Utility Bill To:	Street	City	State	Zipcode	
	Street	City	State	Zipcode	
	Last Name	First	Mi	iddle (Maiden)	
HAVE YOU EVER HAD L	ITILITY SERVICE WITH THE CITY	OF MADISONVILLE? _			
IF SO, WHEN AND AT V	VHAT ADDRESS?				
I am requesting that the	e meter be unlocked and turne	d on and activated in my	name on	Date	<u> </u> .
				Date	