



## APPLICATION FOR SERVICES

SERVICE ADDRESS: \_\_\_\_\_ NO. IN HOUSEHOLD: \_\_\_\_\_

MAILING ADDRESS:  SAME AS SERVICE ADDRESS  
\_\_\_\_\_

TODAY'S DATE: \_\_\_\_\_ DATE OF SERVICE: \_\_\_\_\_

NAME: \_\_\_\_\_

SERVICES:  ELECTRIC  WATER  SEWER  
 RECYCLING  STORM WATER

HOME PHONE: \_\_\_\_\_ MOBILE: \_\_\_\_\_ WORK: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

SOCIAL SECURITY NO.: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

ALT. CONTACT NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ARE YOU RENTING?  YES  NO

LANDLORD NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

HAVE YOU HAD SERVICES WITH US PREVIOUSLY? IF SO:

ADDRESS(ES): \_\_\_\_\_

*\*\*If you are watering sod (new home/construction) or filling a pool,  
please inquire about a sewer reduction meter.\*\**

As part of this application I agree to comply by the service plans and ordinances adopted by the Indianola Municipal Utility Board of Trustees & Indianola City Council. Official copies of these plans are available at the IMU Customer Service Center, 210 W 2nd Ave, Indianola, Iowa. I agree to pay all bills rendered for all utilities and services according to meter registration and billing statements at the current and all future service addresses until I notify IMU's Customer Service Center to discontinue the services. I understand that authorized personnel shall have access to meters and related equipment at all times as provided by law and utility service plans. I further agree that my services shall be discontinued when I am more than 45 days delinquent in payment of any bill rendered. This application shall not be deemed valid until signed by all adults and emancipated minors residing at the aforementioned address. Fraudulent completion of an application shall be reason to deny services.

SIGNED: \_\_\_\_\_

**\*\*\*OFFICE USE ONLY\*\*\***

NAME: \_\_\_\_\_  
DL NO: \_\_\_\_\_  
DOB: \_\_\_\_\_