

# TOWN OF IOWA – COMMERCIAL UTILITY SERVICE FORM

Rent/ Lease Name of Landlord \_\_\_\_\_ Phone# \_\_\_\_\_

**Deposit for New Service is \$200.00 We accept cash, check, money order, Visa, Mastercard & Discover  
(a 4% service fee applies when using a card)**

BUSINESS NAME: \_\_\_\_\_ TAX ID \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

MAILING ADDRESS (if different): \_\_\_\_\_

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

CELL PHONE#: \_\_\_\_\_ OFFICE PHONE#: \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ PHONE# \_\_\_\_\_

Is there a trash can at this service address?  Yes  No

Is the water on at this service address?  Yes  No

**THE UNDERSIGNED AGREES TO BE RESPONSIBLE FOR ALL UTILITY PAYMENTS FOR SERVICES RENDERED BY THE TOWN OF IOWA IN ACCORDANCE WITH THIS APPLICATION.**

Date Service Desired: \_\_\_\_\_ Meter Reading: \_\_\_\_\_

**(Please have all faucets in the off position as the Town of Iowa will not be held responsible for any damage.)**

Applicant Signature: \_\_\_\_\_

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## OFFICE USE ONLY

Customer number: \_\_\_\_\_ Utility Clerk: \_\_\_\_\_