

APPLICATION FOR SERVICES/BENEFITS
City of Statham

(PLEASE PRINT)

NAME: _____

CHECK ONE: RENT (100.00 Deposit) OWN (50.00 Deposit) BUILDER PROPERTY MGR

SOCIAL SECURITY OR FEDERAL TAX ID#: _____ CELL#: _____

PROPERTY ADDRESS: _____

BILLING ADDRESS: _____

EMPLOYER NAME: _____ BUSINESS #: _____

EMPLOYER ADDRESS: _____ CITY: _____

TYPE OF SERVICE REQUESTED: WATER SEWAGE *OTHER (* GARBAGE IS MANDATORY FOR INSIDE CITY LIMITS ONLY.)

DATE TO TURN ON: _____

SIGNATURE OF APPLICANT: _____ Date: _____

"The following is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in the program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to make the race/national origin of individual applicants on the basis of visual observation or surname."

- | | | |
|---------------------------------------|---|--------------|
| 1__ White, not of Hispanic origin | 4__ Hispanic | 7__ Male |
| 2__ Black, not of Hispanic origin | 5__ Asian | 8__ Female |
| 3__ American Indian or Alaskan native | 6__ Native Hawaiian or Pacific Islander | 9__ Business |

"This is an Equal Opportunity Program. Discrimination is prohibited by Federal Law. Complaints of discrimination may be filed with the Secretary of Agriculture, Washington, D.C. 20250."

-----OFFICE USE ONLY-----

Account # _____ Service: Residential Business Other Work Order # _____

Amount of Deposit: _____ Date Paid: _____ Cash Check Receipt # _____

Other Information: _____

IDENTIFICATION: _____ DOB: _____

PREVIOUS SERVICE WITH CITY OF STATHAM: YES NO

Payments are due on the **15th** of each month by 5pm unless otherwise noted on the utility bill. If the 15th falls on a Saturday, Sunday or Holiday, the due date is extended to the following business day.

A Penalty in the amount of **10%** of the account balance will be assessed the business day following the due date.

Accounts with an unpaid balance after 5:00 pm on the **20th** day of the month are subject to disconnection without prior notification and a cutoff fee of \$50.00 will be placed on the account. If water is disconnected for non-payment, service will be reconnected within 24 hours upon FULL payment of ALL past due balances PLUS the cutoff fee at City Hall.

If payment is returned due to insufficient funds/closed account, we will attempt to contact you at the phone number listed on your account. Please check to make sure we have a current phone number on file.

If the account has two payments that are returned for insufficient funds, the account will be placed on a cash only basis. Once the account has remained in good standing for one year, the City of Statham, will change the account to accept all forms of payment.

Any damage to the meter or components will result in charge(s) added to the account.

By signing below I acknowledge that I have read the above policies and I have received a copy of the utility rates.

Signature

Date