



125 N. Main Avenue ~ Hartford, SD 57033  
Phone 605.528.6187 Fax 605.528.3320

## APPLICATION FOR WATER/ SEWER SERVICE

Closing/Move In Date: \_\_\_\_\_

Applicant: \_\_\_\_\_ Joint Applicant: \_\_\_\_\_

Service Address: \_\_\_\_\_ Own or \_\_\_\_\_ Renting

Mailing Address (if different from above): \_\_\_\_\_

Phone # Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

(Joint Applicant) Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

(Applicant)

(Joint Applicant)

Social Security #: \_\_\_\_\_ SS#: \_\_\_\_\_

(Applicant)

(Joint Applicant)

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

(Applicant)

(Joint Applicant)

- Copy of photo identification (government issued and not expired) must accompany this application for each applicant.

**NOTE: A \$75.00 water deposit is required for service for homeowners. A \$125.00 water deposit is required for service in a rental. Application and Deposit must be turned in and paid prior to closing date/move in date.**

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**OFFICE USE ONLY:**

Start Date: \_\_\_\_\_ Acct #: \_\_\_\_\_

Book: \_\_\_\_\_ Route: \_\_\_\_\_ Water Reading: \_\_\_\_\_

Deposit Received: \$ \_\_\_\_\_ Date: \_\_\_\_\_

Deposit Refunded: \$ \_\_\_\_\_ Date: \_\_\_\_\_

Other Deposits: \$ \_\_\_\_\_ Date: \_\_\_\_\_ Former owner/occupant: \_\_\_\_\_