



**CITY OF NOKOMIS
22 S CEDAR ST
NOKOMIS, IL 62075**

**Phone: (217) 563-2514 Fax: (217) 563-7217
Email: rachel@cityofnokomis.com**

OFFICE USE ONLY:

Customer #: _____

Route #: _____

\$150 Deposit Paid:

Check# _____ Cash CC

APPLICATION FOR WATER SERVICE

Please provide your Government Issued Photo I.D. – The City of Nokomis reserves the right to keep a copy of your photo I.D. on file.

Today's Date: _____ **Service Start Date:** _____

Name on Account: _____ **SSN:** _____

Driver's License # _____ **Do you own or rent?** _____

Contact Phone #: _____ **Alternate Phone #:** _____

Roommate/Spouse: _____ **Ph. #:** _____

Service Address: _____ **E-Mail** _____

Billing Address (if different): _____ ☐ **Paperless** ☐ **Post Card**

Landlord's Name & phone # (if rent): _____

Previous Address: _____

Current Employer: _____ **Employer Ph. #:** _____

In case of a water emergency, person to notify: _____ **Phone #:** _____

Initial

☐

I understand that I will be responsible for payment of the water service at the above-referenced address. Applicant should be home when water service is turned on or off. Applicant assumes all responsibility for any open outlets resulting in water loss or damages. I understand only a City employee or licensed plumber can turn water on or off at the meter. I understand that my house must have a working whole house shutoff, if not, a \$50 fee may be charged to me for water being turned off at the meter after hours.

☐

I understand that my water bill is due the 15th of every month by 4pm to be "on time", whether I receive my water bill in the mail or not. If I do not receive my water bill, I can call City Hall at 217-563-2514 and ask how much my bill is and get a printout if needed.

☐

I understand that if I do not pay my current water bill by 4pm on the 15th of the month, I will have to pay a late fee of \$10 or 10%, whichever is higher by the first business day of the following month. (i.e. if not paid by July 15th, late payment must be received by 4:00 pm on August 1st to avoid shutoff and a \$50 fee)

☐

I understand that if I do not pay the past due amount by the date stated on my yellow notice, I will have to pay the past due, current, and a \$50 late fee. I understand that my water may be shut off if the past due amount is not paid by the date stated on the yellow past due notice. If I do not have a deposit on file, a deposit will be required in order for water to be turned back on.

I hereby state and represent that the information in this application is complete and accurate. I hereby authorize the City of Nokomis "Hereafter City", or City's agent to verify the information in this application. Verification or re-verification of any information contained in this application will be retained by the City. I hereby authorize the City to obtain information about me, including but not limited to, this application, my credit, my tenant history, my check writing history, any court records and/or my criminal record, if any, and I hereby authorize and instruct any entity or person contacted by the City, or the City's agents, to release such information to them. Upon request, the City or City's agents, will provide the name and phone number of the source of the information used in the verification process.

Signature of Applicant: _____ **Date:** _____