

City of Hoyt Lakes

**Application for Utility Service**

Name: \_\_\_\_\_

Date of Application: \_\_\_\_\_

Service Address: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell/Work Phone: \_\_\_\_\_

Date of Home Purchase / Effective Date: \_\_\_\_\_

Purchased From: \_\_\_\_\_

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

I hereby request utility service from the City of Hoyt Lakes for the service address above. I agree to pay all charges for such service on or before the due date printed on the bill. I hereby certify the above information I have provided is true and correct.

**Change Request**

Name: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Disconnect    Reconnect    Billing Address Change    Auto pay:    Yes    No

Delete / Add / Change    Delete / Add / Change

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

**\*\*Temporary Disconnects must be for at least 60 days\*\***

**Office Use Only:**

Account #: \_\_\_\_\_ Status: \_\_\_\_\_

Bill Month: \_\_\_\_\_ ID Verified/Known: \_\_\_\_\_

Request by:    Phone    Email    Fax    In Person

Applicable Fees:    Disconnect \$50    Reconnect \$50    Service Connection    \$10

Shut off / Turn on    Date: \_\_\_\_\_ By: \_\_\_\_\_