



City of Harrah

Beginning Service Date _____

Account # _____

Application for Utility Service

Service Address _____

Mailing Address (if different from above service address) _____

Occupant is the: Owner Renter Landlord Name: _____

Occupant info

Legal Name: _____ SSN#: _____ DOB: _____

Previous Address: _____ Email: _____ Cell/Home # _____

Employer _____ Work # _____

Co-Occupant info

Legal Name: _____ SSN#: _____ DOB: _____

Previous Address: _____ Email: _____ Cell/Home # _____

Employer _____ Work # _____

Emergency Contact Someone not living with you

Emergency Contact Name: _____ Relationship to Primary _____

Address: _____ Phone #: _____

Payment Options

Auto Draft Yes (voided check required) No

By selecting yes, I authorize the City of Harrah to begin monthly recurring bank drafts from my checking account for payment of my utility bills, I understand the City of Harrah reserves the right to end my participation in the Automatic Bank Draft program at any time.

E-Pay www.cityofharrah.com Signup to view and pay your statement from anywhere with internet access.

Lobby & Drive Thru Open Monday – Friday 9am to 5pm excluding holidays.

Drop Box Available 7 days a week 24 hours a day.

A copy of the photo ID is required for Occupant and Co Occupant.

The Occupant and Co Occupant of this account agree to pay adapted rates set forth by the City Council for the City of Harrah/ Harrah Public Works Authority and follow regulations governing said services. This application becomes a financial contract upon the establishment of utility service. It is agreed that if the undersigned permanently leave this address, they are responsible for any and all balances incurred while living at said premises. The Undersigned agrees to all regulations governing said services

Occupant Signature: _____ Date: _____

Co Occupant Signature: _____ Date: _____

OFFICE USE ONLY

Polycart x _____ / Dumpster x _____ Size _____ # of Pickups Weekly _____ Trash W/O _____

Meter # _____ RNI Read _____ Water W/O _____

Deposit Paid By: CASH CHECK CCD ONLINE

Entered By: _____

Email completed form and picture ID to: utilityclerk@cityofharrah.com