

## City of Libby 952 E. SPRUCE | POST OFFICE BOX 1428

LIBBY, MT. 59923 | Phone 406-293-2731 | Fax 406-293-4090 | Website: <u>www.cityoflibby.org</u>

## **Water/Sewer Service Deposit Form**

**In Agreement:** A deposit of \$150 is required for **NEW** water service. The deposit will be placed in a non-interest bearing account. If the customer is the property owner, the deposit will be refunded to the customer after one (1) year of *credible* service or at such time as they move and all charges are cleared on the account. The undersigned agrees to pay for all utilities in accordance with the City of Libby policies. A Past-Due Notice will be mailed after the 20th of the month, at which time a \$10 Late Fee will be added to the account. If Service is shut off for non-payment, the Past-Due Balance MUST be paid IN FULL and a disconnect/reconnection fee of \$50 must be paid before service will be reinstated. Past due water & sewer bills will be put into a tax lien.

Name:			
Physical Address:			
Mailing Address:			
Home/Cell Phone:	Work Phone:		
SSN: DOB:			
Employer:	City:	St/Zip:	
Employer Address:		Phone:	
Owner Renter Landlord Name: _			
Mailing Address:		Phone:	
The Property Owner(s) of the premises stated above Sewer use and debt service charges for the above Paragraph 6: "I (we) give permission to have the above renter at the mailing address listed. In the benefits to any premises, the Governing Body may to be disconnected until such charges are paid in fu	e said premises. Ci  Water Sewer event of non-paymedirect the supply of	ty of Libby Ordinance #1343, Rule 6 bill for the above premises sent to the ent of charges for $\square$ Water $\square$ Sewe	
The effective date for this change is			
Signed:	Date:		