

**CITY OF BOLIVAR
BUSINESS UTILITY SERVICE AGREEMENT**

EFFECTIVE DATE _____ ROUTE NO _____ ACCT NO _____

BUSINESS NAME _____

TID# _____ - _____ PHONE # _____ FAX # _____

MANAGER/PRIMARY CONTACT _____

PRIMARY PHONE # _____ ALT# _____

SERVICE ADDRESS _____

BILLING ADDRESS _____

IF RENTING, BUILDING OWNER'S NAME _____

BUILDING OWNER'S PHONE NUMBER _____

PRIOR UTILITY SERVICE WITH CITY OF BOLIVAR? Y / N

IF YES, PRIOR SERVICE ADDRESS _____

EMERGENCY CONTACT _____

TITLE/POSITION _____ PHONE# _____

I AGREE TO ABIDE BY ALL OF THE BOLIVAR CITY ORDINANCES PERTAINING TO WATER AND SEWER SERVICES AND STATE THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE THIS ____/____/____

SIGNATURE _____

SIGNATURE _____