



CITY OF GRINNELL CUSTOMER APPLICATION

APPLICANT INFORMATION

Name:		Effective Date:
Date of birth: (optional)	Social Security No.: (optional)	
Service address:		
Mailing address if different:		
Email address:		
Phone:		Alternate Phone:
Are you	RENTING	PURCHASING*
<small>*IF PURCHASING ON CONTRACT, WE NEED TO SEE A COPY OF THE CONTRACT.</small>		

EMPLOYMENT INFORMATION

Current employer:		
Employer address:		How long?
Phone:	E-mail:	
City:	State:	ZIP Code:
Relative not residing with you:		
Address:		Phone:
City:	State:	ZIP Code:
Relationship:		
Signature of applicant		Date

FOR CITY OFFICE USE ONLY (DEPOSITS):

Method of Payment: Cash Check Credit/Debit Card (3.00% fee = \$4.50)

Received By:

Account Number:

Note: All residents that are renting a residential property are required to pay a deposit of \$150.00 for water service. Email completed form to smealey@grinnelliowa.gov or deliver to City of Grinnell 520 4th Ave Grinnell, IA 50112