

City of Lincoln Center

153 W. Lincoln Avenue, P.O. Box 126, Lincoln, KS 67455

Office 785-524-4280 Fax 785-524-3408

Utility Service Application

~ PLEASE PRINT CLEARLY ~

PICTURE ID IS REQUIRED OR UTILITY SERVICE WILL NOT BE PROVIDED

Primary Applicant Name		Today's Date	Service Requested Start Date
Business Name, if applicable		Service Address	
Date of Birth	Home Phone	Mailing Address (if different)	
Social Security #	Driver's License #	Landlord Name, if applicable	
Employer	(√ One) <input type="checkbox"/> OWN <input type="checkbox"/> RENT		(Service Type, √ One) <input type="checkbox"/> RES <input type="checkbox"/> COM <input type="checkbox"/> IND
Work Telephone	Total Number of Occupants including Children _____		

Previous Address	City	State	Zip
Length of Time at this Address	Previous Utility Company		
Have you or other applicant(s) lived in the City of Lincoln Center before? <input type="checkbox"/> YES <input type="checkbox"/> NO			
If Yes, Under what Name?			
Person to Call in Case of Emergency other than those occupying this address			
Name:	Phone:	Relationship:	

Co-Applicant Information Required (Any person 18 or older residing at this address)

Persons listed as co-applicants will be responsible for the utility service in the event of default by the primary applicant.

Co-Applicant Name	Social Security #
Employer	Work Telephone
Co-Applicant Name	Social Security #
Employer	Work Telephone

If your household situation changes, (i.e., adults living in the home) you are required to complete a new service application.

The Privacy Act regulates the use of Social Security Number (SSN) by government agencies. The City of Lincoln Center requires the mandatory disclosure of Social Security Numbers upon completing a service application. The SSN may be used to collect delinquent account balances through the State of Kansas Setoff Program or contracted collection agency. No other use or distribution of SSN will be allowed. Failure to disclose required SSN will result in denial of electric and water utility services.

Applicant Signature

Date

Co-Applicant Signature

Date

I hereby make application for service at the address indicated, subject to the Rules and Regulations as provided by the Governing Body of the City of Lincoln Center. I understand the following:

1. If applicant is not owner of property, utility service deposit is **REQUIRED** for each service as follows: \$180.00 = \$30.00 Water, \$150.00 Electric.
2. For Connection or Reconnection Contact the City Clerk's Office at 524-4280 between the hours of 8 a.m. – 12 noon and 1 p.m. – 5 p.m.
3. A reconnection charge for utilities disconnected due to delinquency shall be as follows: \$25.00 Water \$25.00 Electric
4. Utility Services needing to be reconnected on Saturday, Sunday, City Holidays or after normal working hours of 8 a.m. – 5 p.m. will be as follows: \$40.00 Water & \$40.00 Electric.
5. All outstanding utility bills must be paid prior to transfer of deposit and/or service from one address to another.

COLLECTION POLICY:

Payments are payable on the 1st and due by the 10th of each month without penalty. Following the 10th penalties will be added to the account and notices sent. Any customer receiving such notice may request a hearing to make arrangements to avoid disconnection. If total amount due or agreement is not reached on or before the deadline established (10:00 a.m. on the 21st of each month), and the City records show that the consumer has had due notice of the billings and of his right to be heard concerning the same, then the City Clerk shall cause such service to be discontinued.

I, the undersigned, do hereby agree to pay the City of Lincoln Center, Kansas at the City Hall of said City, for utility services beginning on the date of connection to premises. Payment is to be made monthly by the 10th of each month (without penalty), as specified above. I know that my service will be turned off if the bill is not paid by 10:00 a.m. on the 21st of the month.

I further state that I am not, nor is my spouse/co-applicant, as of this date, in arrears to the City of Lincoln Center for any previous utility bills.

Applicant's Signature

Spouse's/Co-Applicant's Signature

Date

Date