



Here'll always be Hope in Kansas!

PO Box 307
113 N Main Street
Hope KS 67451

UTILITY SERVICE APPLICATION

(Application must be filled out completely before service will be approved.)

Phone: (785)366-7218

ADDRESS FOR SERVICE _____ DATE SERVICE REQUESTED _____

TOTAL NUMBER OF OCCUPANTS _____ MAILING ADDRESS _____

NAME (LAST, FIRST, MIDDLE IN.) _____ DATE OF BIRTH (M/D/Y) _____

PHONE NUMBER WHERE YOU CAN BE REACHED _____

DL# & STATE _____ SSN _____

CURRENT EMPLOYMENT (IF MILITARY, UNIT DESIGNATION) _____

ADDRESS/PHONE OF EMPLOYMENT _____

NAME OF SPOUSE/ROOMMATE(S) _____ DATE OF BIRTH (M/D/Y) _____

CURRENT EMPLOYMENT (IF MILITARY, UNIT DESIGNATION) _____

ADDRESS/PHONE OF EMPLOYMENT _____

DL# & STATE _____ SSN _____

DO YOU ...? (CIRCLE ONE) OWN RENT IF RENTING, LANDLORD NAME, ADDRESS & PHONE

NEAREST RELATIVE & ADDRESS (STREET, CITY, STATE, ZIP, PHONE) _____

PREVIOUS ADDRESS _____

PREVIOUS UTILITY COMPANY & ADDRESS _____

NAME OF YOUR BANK _____

DO YOU OWN A DOG OR CAT? _____ IF SO, ORDINANCE #414 REQUIRES REGISTRATION WITH THE CITY.

SIGNATURE _____ DATE _____

SPOUSE/ROOMMATE SIGNATURE _____ DATE _____

TO BE COMPLETED BY THE CITY OF HOPE

DATE:	APPROVED / DENIED	WATER DEPOSIT:	ACCT#	METER
SEQ#		Check#		
		Cash		