



Sturgis Utilities Department  
1040 Harley-Davidson Way  
Sturgis, SD 57785 \* 605.347.4422  
www.sturgis-sd.gov  
sturgisutilities@sturgisgov.com

## Application and Agreement for Water, Sewer and Garbage Services

**PLEASE PRINT CLEARLY**

Applicant (First, Middle, Last) \_\_\_\_\_

SS# \_\_\_\_\_ Driver's License # \_\_\_\_\_ State \_\_\_\_\_

Co-Applicant (First, Middle, Last) \_\_\_\_\_

SS# \_\_\_\_\_ Driver's License # \_\_\_\_\_ State \_\_\_\_\_

Business Name (if applicable) \_\_\_\_\_ FEIN # \_\_\_\_\_

Email \_\_\_\_\_ Utility Connect Date \_\_\_\_\_

Phone: Home or Cell (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

Have you had service with us in the past? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, where? \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Employer's Name, Address, Phone Number \_\_\_\_\_  
\_\_\_\_\_

Property Address \_\_\_\_\_

Mailing Address (if different from above) \_\_\_\_\_

Own  Closing Date \_\_\_\_\_

Rent  Rental/Lease Date \_\_\_\_\_ Landlord \_\_\_\_\_

**PLEASE READ: Be advised that fees may continue to accrue on your account that is still active but has been sent to collections for non-payment.**

*By signing this application, applicant has read above and also certifies the above information to be true and accurate and is agreeing to be financially responsible for all utility bill charges including late fees, reconnect fees, etc., as long as the utility bill remains in applicant's name. Deposits will be applied to the final bill after service is terminated. Applicant is responsible for promptly contacting the City of Sturgis if the property is sold, applicant moves or of any changes that may affect the account. As a utility customer, applicant agrees to comply with all MUB Regulations and City ordinances and will provide access to the utility meters for reading and/or maintenance.*

Applicant(s) Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE ONLY:**

Deposit Amt: \_\_\_\_\_  Cash  Credit Card  Check # \_\_\_\_\_ Rcpt # \_\_\_\_\_



*"In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, age, disability, religion, sex, familial status, sexual orientation, and reprisal."  
(Not all prohibited bases apply to all programs.) "This institution is an equal opportunity provider."*