## CITY OF BADGER 120 1st STREET SE P.O. BOX 253 BADGER, IOWA 50516

## Application for Utility Services

Name of Applicant:						
Social Security Numb	oer:					
Service Address:						
Mailing Address:						
Telephone Number:						
If Renting:						
Landlord's Name	Street	Cit	У	State	Zip Code	
Employment:	ment:			Phone:		
Household size	Family	Single		_Busine	SS	
A \$100.00 deposit is r \$200.00 This deposit full.	•	•	•			
Deposit Amount:		Date Received:				
I, hereby apply for ut	•	•		_	-	
regulations of the Cit						
Badger until I give no	otice to the City of	f Badger to di	scontinu	e said u	utility services	
City of Badger	Signature of Applicant					
Date		oate				