



## Application for Utility Service with The City of Little River, KS

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Date: \_\_\_\_\_

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Service Address Applying for: \_\_\_\_\_

Property Owner: \_\_\_\_\_

New Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Check Services: **Gas**  Non-Refundable Service Connection Fee \$81.60

**Water**  Non-Refundable Service Connection Fee \$80.00

**\*CREDIT REFERENCES:** If you can provide a minimum of 2 credit references for the City Council's review, upon their recommendation, you **MAY** receive a credit of \$40.00 on your city gas bill and/or a credit of \$40.00 on your city water bill. These references **MUST BE** provided **BEFORE** the city's next regular council meeting after utility service is established.

Number of Trash Carts: 65-Gallon \_\_\_\_\_ 95-Gallon \_\_\_\_\_

Number of Recycle Carts: 95-Gallon \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Spouse's Place of Employment: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

**PAST HISTORY**

Previous Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Number of Dogs: \_\_\_\_\_ Dog Tags Required:  Unsexed: N/C  Sexed: \$6.00

Description: \_\_\_\_\_

Number of Cats: \_\_\_\_\_ Cat Tags Required:  Unsexed: N/C  Sexed: \$6.00

Description: \_\_\_\_\_

**EMERGENCY INFORMATION**

Number of individuals that will be residing at service address: \_\_\_\_\_

List Names and Date of Birth of all individuals: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IN CASE OF EMERGENCY, WHO SHOULD WE CONTACT: (List someone not living with you)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Phone #: \_\_\_\_\_

Signature: \_\_\_\_\_