

Date \_\_\_\_\_

Poteau Public Works Authority  
Contract for Service  
(Water, Sewer, Trash)

Name of responsible party \_\_\_\_\_ # of occupants \_\_\_\_\_

Date of birth \_\_\_\_\_ SSN \_\_\_\_\_

Service address \_\_\_\_\_

Mailing address (if different from service address) \_\_\_\_\_

Occupation/ Employer \_\_\_\_\_ Dept \_\_\_\_\_ Phone # \_\_\_\_\_

Employers address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Spouse/ Co-occupant \_\_\_\_\_ Relationship \_\_\_\_\_

Date of birth \_\_\_\_\_ SSN \_\_\_\_\_

Occupation/ Employer \_\_\_\_\_ Dept \_\_\_\_\_ Phone # \_\_\_\_\_

Employers address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

*Disclosure of your Social Security number is voluntary. Under Article 10, Section 17, Oklahoma Constitution this City is required to collect all fees and charges for utility services provided to its customers*

Name of property owner \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City/ State/ Zip \_\_\_\_\_

Have you ever had service with the city of Poteau Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, when and at what address \_\_\_\_\_ - \_\_\_\_\_

**THE UNDERSIGNED HEREBY AGREES TO PAY THE ESTABLISHED RATES SET FORTH BY THE CITY OF POTEAU ORDINANCES AND AGREES TO THE REGULATIONS OF SAID SERVICE. THIS APPLICATION BECOMES A CONTRACT UPON THE ESTABLISHMENT OF SERVICE**

Applicant \_\_\_\_\_  
Signature

Authorized agent \_\_\_\_\_  
Signature

**OFFICE USE ONLY**

**ACCOUNT #** \_\_\_\_\_

**DEPOSIT #** \_\_\_\_\_

**DATE** \_\_\_\_\_

**DEPOSIT AMOUNT \$** \_\_\_\_\_