



25 Center St
 Vermillion SD 57069
 Phone 605-677-7056
 finance@cityofvermillion.com
 www.vermillion.us

APPLICATION AND AGREEMENT FOR RESIDENTIAL/COMMERCIAL UTILITY SERVICE

NOTE: PAYMENT OF ALL DEPOSITS AND FEES ARE DUE BEFORE SERVICE WILL BE ESTABLISHED.

Please Print Clearly

Name _____
 (Last) (First) (Initial)

Service Address _____
 (Apt #)

Mail bills Same as Service Address
To _____
 (if different from above)

 (City) (State) (Zip)

Phone No. _____

Date of Birth _____

Personal ID _____
 Social Security # or Drivers License # & State issued

Deposit & Fee Schedule	
Residential Electric Deposit	\$30.00
Residential Water Deposit	\$15.00
Commercial Electric & Water Deposit	*Variable
Electric Service Fee	\$10.65
Water Service Fee	\$10.00
After Hours Electric Service Fee	\$53.25
After Hours Water Service Fee	\$50.00
*Commercial electric and water deposits are equal to one month's estimated billing by service.	
<u>PAYMENT OF ALL DEPOSITS AND FEES ARE DUE BEFORE SERVICE WILL BE ESTABLISHED.</u>	

I understand that completing this application will start all applicable services (electric, water, sewer, recycling, security light and/or mobile home fees) provided to this address and I am personally responsible for all charges including any late fees. Utility services will continue in my name until I request them to be terminated unless service is disconnected for nonpayment of the utility account as outlined by our disconnect policies. All applicable residential deposits will be applied onto my final bill after service is disconnected. As a utility customer, I agree to comply with all City ordinances and will provide access to the utility meters for reading and/or maintenance.

 Customer Signature

 Date

Start (Connection) Date _____
 (Monday thru Friday 8 a.m. to 4 p.m., excluding holidays)

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

If Yes, Where:

Are you interested in automatic payment?
 _____ Yes _____ No

If yes, please attach a voided check.

Are you interested receiving your bill by email?
 _____ Yes _____ No

E-mail _____

Do you also want to receive a bill in the mail?
 _____ Yes _____ No

For Office Use Only
Account No. _____
Deposit Amt _____
Receipt No. _____
Any Outstanding Accts? _____