

# Commercial Water & Sewer Application



Date of Service Requested: \_\_\_\_\_

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

Service Address: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Tax ID #: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Business Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

**Deposit Amounts: \$50 for water / \$50 for sewer**

Rent: \_\_\_\_\_ Own: \_\_\_\_\_

**If renting, please provide the name and address of your landlord:**

Landlord: \_\_\_\_\_

Address: \_\_\_\_\_

**How would you like to receive your monthly statement?**

Paper: \_\_\_\_\_ Email: \_\_\_\_\_ Both: \_\_\_\_\_ Email address: \_\_\_\_\_

I acknowledge that the above information is true and correct and I hereby apply for water/sewer service and agree to comply with all ordinances, rules or regulations as prescribed by the City of Raymore applicable to the furnishing of water/sewer service.

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

SEWER OPTIONS: ACTUAL VOLUME _____ WINTER AVERAGE _____	<b>Office Use Only</b>
WORK ORDER # _____ INITIALS _____ DATE/TIME _____	