819 1st Avenue South I Fort Dodge, Iowa 50501
Phone (515) 573-7156 I Fax (515) 573-7158
www.fortdodgeiowa.org

Account No.: _____
Deposit No.: _____ Amt.: _____
Employee Initials: _____

Fort Dodge Water Department

COMMERCIAL WATER SERVICE APPLICATION

PLEASE TYPE ALL INFORMATION. HANDWRITTEN FORMS WILL NOT BE ACCEPTED.

Requested Start Date: _____

SERVICE ADDRESS

Street Address _____

Ownership Status ☐ Own ☐ Rent

BUSINESS INFORMATION

Commercial Name/DBA _____

Mailing Address _____

City _____ State _____ Zip _____

Phone Number _____

Function/Type of Business _____ Tax ID Number _____

BUSINESS OWNER/AUTHORIZED CONTACT PERSON INFORMATION

First Name _____ Last Name _____

Date of Birth _____

Driver's License Number _____ DL Issuing State _____

Phone Number _____ Email Address _____

EMERGENCY CONTACTS

Name _____ Phone Number _____

Name _____ Phone Number _____

BILLING PREFERENCE

Choose from the following: ☐ Email ☐ Paper Bill

I hereby apply for services at the above address, which include water and/or sewer, trash and stormwater. I understand that a deposit is required for all rental properties. I further agree to comply with the City of Fort Dodge's Municipal Code Chapter 13.04 - WATERWORKS RATES AND REGULATIONS, a copy of which is available on the City website or upon request.

_____ _____
Signature of Primary Applicant Date

Copies of valid drivers' licenses or state issued IDs for the business owner/authorized contact person listed above must accompany all completed applications. Incomplete applications or applications without a deposit (when required) will NOT be processed.