

INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government in order to monitor compliance with applicable Federal Civil Rights laws. You are not required to furnish this information, but are encouraged to do so. The law states that a provider of services may neither discriminate on the basis of this information, nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations the provider of services is required to note race, ethnicity, and sex on the basis of visual observation or surname.

ETHNICITY: Not Hispanic or Latino Hispanic or Latino

RACE (mark one or more): White Native Hawaiian or Other Pacific Islander

American Indian/Alaskan Native Asian Black or African American

Some Other Race

SEX: Female Male COMMERCIAL ACCOUNT

PO Box 267 **Phone: 701-349-3252** **TDD: 800-366-6889**
Ellendale, ND 58436 **FAX: 701-349-3333** **email: ellendal@drtel.net**

CUSTOMER APPLICATION CARD – CITY UTILITIES

"THIS INSTITUTION IS AN EQUAL OPPORTUNITY PROVIDER AND EMPLOYER."

City of Ellendale
701-349-3252

DATE SERVICE TO BEGIN _____

NAME (PRINT) _____
(LAST) (FIRST) (MIDDLE I)

DATE OF BIRTH _____

SERVICE ADDRESS: _____ HOME PHONE: _____

MAILING ADDRESS: _____ WORK PHONE: _____

EMAIL ADDRESS _____

IF RENTING, LANDLORD'S NAME: _____ CITY: _____

EMPLOYER: _____

PERSON TO CONTACT FOR A HOUSE EMERGENCY _____
(WATER – SEWER)

RELATIONSHIP: _____ TELEPHONE: _____

ADDRESS: _____

SPOUSE/PARTNER NAME (Please print) _____

INCLUDE THIS NAME ON THE BILLING? YES OR NO

SPOUSE/PARTNER EMPLOYER _____

WATER UTILITY CONTRACT

In agreement with the City of Ellendale, I will be responsible to pay the City of Ellendale for water and all charges applied to the water utility bill supplied by the City of Ellendale each month. I further accept responsibility for all service and all necessary repairs on the water meter caused by and unauthorized act, carelessness, or negligence of myself or tenant.

By signing this utility contract, I assume responsibility for the water utility bill at the service address until the date that I notify the City of Ellendale for final meter reading and checkout.

Name (Please print) _____

Signature _____

Date _____

The City of Ellendale requires a \$25 non-refundable hookup fee and a \$60 deposit.

DO NOT WRITE BELOW - FOR OFFICE USE ONLY

METER DEPOSIT AMOUNT: _____

DATE PAID: _____

DATE DEPOSIT IS REFUNDED OR APPLIED TO ACCOUNT _____

