



GOWRIE MUNICIPAL UTILITIES

PO Box 47
Gowrie, Iowa 50543

Telephone 515-352-3065

APPLICATION FOR UTILITY SERVICES

Applicant's Name _____

Service Address _____

P. O. Box _____

Billing Address _____
(if different from service address)

Phone Number _____

Social Security/Driver's License No. _____

I hereby apply for utility services for the premises listed above beginning _____, 20____ pursuant to the rules of the utility. I agree to pay all bills rendered by the utility until I give notice to the utility to discontinue services.

Signature of Applicant _____

Welcome to Gowrie! We pride ourselves on being a very caring and friendly community. A "Welcome Wagon" is prepared to greet you and to help you with any questions about services available locally or in the area in addition to offering some "freebies" from local organizations. We also, however, respect your right to privacy. If you would prefer NOT to receive such a visit, please sign below, and your name will be withheld from the newcomers' list.

I prefer NOT to be "Welcomed" to Gowrie. Signed: _____