
Village of Kenesaw

109 N Smith Avenue – PO Box 350
Kenesaw, NE 68956
(402) 752-3222

Application for Services Water/Sewer/Garbage

DATE OF APPLICATION: _____

DATE SERVICES TO BEGIN: _____

Customer/Applicant Name: _____

Service Address: _____

Rent _____ Own _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____

Phone #: _____ Alt. Phone #: _____

SSN or Driver's License #: _____

Place of Employment: _____

Moving from: _____ Moving to: _____

****IF RENTAL ****

Landlord's Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone #: _____ Alt. Phone #: _____

*****UTILITY DEPOSIT REQUIRED: \$180.30*****

Accounts are reviewed annually on the anniversary of the start date. Deposits will be refunded if the account has no more than 2 late payments within the 12 months prior to the anniversary date.

The undersigned hereby makes application to the Village of Kenesaw for water, sewer and garbage service at the address shown above, to begin on the date shown above and agree to pay for said service as bills are rendered. If I am a renter and do not keep my account current, I hereby recognize the right of the Village of Kenesaw to notify the owner of the rental property of intent to disconnect for non-payment of bills to allow the owner the opportunity to prevent damage to the property.

Signature of Customer/Applicant

Beginning Meter Read: _____ Date: _____ By _____ Entered _____