



Utility Billing Change of Account for Renter

Please return this form to City Hall located at 315 N Broadway the office or drop box,
mail to PO Box 350, Pelican Rapids MN 56572, or fax to 218-863-7077.

Please call 218-863-7076 with any questions.

Account Number _____

New Renter(s) _____ Phone _____

Address for payment _____

City _____ State _____ Zip _____

Please sign the statement below.

I, _____ am requesting the utility bill at the
above address be changed to my name as of (date) _____.

If you would like your utility bill paid automatically please attached a voided check and
sign here.

Signature of person requesting automatic deductions for utility bill.

Automatic payments will be deducted on the 15th of each month.

Bills are mailed approximately the 1st of every month.

I/WE UNDERSTAND THAT PAYMENT FOR WATER/SEWER SERVICE IS REQUIRED IN <u>FULL</u> BY THE 15 TH OF EACH MONTH. I/WE ALSO UNDERSTAND THAT MY SERVICE MAY BE DISCONNECTED FOR NON- PAYMENT AFTER THE 25 TH OF EACH MONTH. I ALSO AGREE TO PAY A \$30.00 RECONNECT FEE IF MY WATER/SEWER SERVICE IS DISCONNECTED.
