

CITY OF DELMAR  
UTILITY DEPOSIT AGREEMENT

Ordinance 6-6-7 CUSTOMER GUARANTEE DEPOSITS. Customer deposits shall be required of all customers who are tenants or others having no established credit record, and of those who have an unacceptable credit record or who have a prior record of failure to pay water bills rendered. Such deposit shall be one hundred dollars (\$100.00) dollars for homeowners or one hundred fifty (\$150.00) for renters. Deposits of customers having established acceptable credit records for three (3) years shall have their deposit returned without interest. An occurrence of a bad payment record may be the occasion for the City Clerk – treasurer – administrator to require a new or larger deposit for the continuation of service. (*Code of Iowa, Sec. 384.84(1)*)

I have read and understand the above ordinance:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Person Responsible for the Account: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Please check one: Homeowner \_\_\_\_\_ Renter: \_\_\_\_\_

<p><i>Renters Only:</i></p> <p>Landlord Name: _____</p> <p>Mailing Address: _____</p> <p>City, State, Zip Code: _____</p> <p>Phone Number: _____</p>
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*“ In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, age, disability, religion, sex and familial status (Not all prohibited bases apply to all programs).*

*To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or call 800-795-3272(voice) or 202-720-6382 (TDD)”*

For office use only:	Account #: _____	Touch Read Serial #: _____	Meter reading: _____
Date paid: _____	Deposit amount: _____	Cash _____	Check: _____ Check #: _____
Date of expected return: _____	Date of last delinquency: _____	Date of return: _____	