

PeopleService, Inc.
209 S. 19TH St. SUITE 555
Omaha, Ne. 68102
Phone 402/932-8143

APPLICATION / DEPOSIT
CITY OF LAKELAND
WATER UTILITIES
RETURN IN 7 DAYS

APPLICATION TYPE: **BUSINESS OR RESIDENTIAL** (please circle one)

ACCOUNT # _____

SERVICE START DATE: _____

NAME: _____

PHONE: _____ SS# _____ DRIVERS LIC.# _____

STREET ADDRESS: _____

CITY / STATE : _____ ZIP: _____

BILL TO ADDRESS: (If different from above)

STREET ADDRESS: _____

CITY / STATE : _____ ZIP: _____

PLACE OF EMPLOYMENT: (Not applicable to Business application)

COMPANY NAME: _____

WORK PHONE: _____

STREET ADDRESS: _____

CITY / STATE : _____ ZIP: _____

IF RENTAL PROPERTY, PLEASE COMPLETE:

LANDLORD NAME: _____

LANDLORD PHONE: _____

STREET ADDRESS: _____

CITY / STATE : _____ ZIP: _____

*** A NEW ACCOUNT FEE OF \$25.00 MUST BE RECEIVED BEFORE SERVICE CAN BE RENDERED.***

| |
|---------------------|
| PSI Use only |
| Date Sent _____ |
| Date Received _____ |
| Received by _____ |

APPLICANT SIGNATURE

DATE

Please make check payable to PeopleService, Inc. and return with this application within 7 days to avoid water interruption.
After 1st bill, on-line available at www.peopleservice.com
THANK YOU!