

# Residential Utility Service Application

903 W. Main. St. Blue Springs, MO 64015  
[water@bluespringsgov.com](http://water@bluespringsgov.com) | 816-622-4444



## ESTABLISHING NEW WATER/SEWER SERVICES

In order to establish services with the City of Blue Springs, please complete the following application, and either e-mail it to: [water@bluespringsgov.com](mailto:water@bluespringsgov.com) or if you prefer to do business in person, drop off the completed application at our office at 903 W Main Street. You may also contact us at (816) 622-4444, M-F, 8am-5pm to Establish, End or Transfer services.

<b>***FOR OFFICE USE ONLY***</b>
<b>ACCOUNT #</b> _____
<b>SERVICE LOCATION #</b> _____
<b>SERVICE ORDER #</b> _____

TODAY'S DATE \_\_\_\_\_ OWN \_\_\_\_\_ RENT \_\_\_\_\_

REQUESTED SERVICE DATE \_\_\_\_\_  
*Business Days Only \$40 Same Day Service Fee Applies for Same Day Service OR  
If the Request is made after 5PM for the following day*

APPLICANT NAME \_\_\_\_\_  
*(First, Middle, Last, Suffix or Business Name)*

DOB \_\_\_\_\_ LAST 4 OF SSN # XXX-XX- \_\_\_\_\_ DRIVERS LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_

SERVICE ADDRESS \_\_\_\_\_

MAILING ADDRESS, *if different from service location* \_\_\_\_\_  
*(Address, Suite #, City, State, ZIP or PO BOX #, City, State, ZIP)*

HOME # \_\_\_\_\_ CELL # \_\_\_\_\_ EMERGENCY # \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

2<sup>nd</sup> APPLICANT \_\_\_\_\_ PHONE # \_\_\_\_\_

LAST 4 OF SSN # XXX-XX- \_\_\_\_\_ DRIVERS LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_

- Applicants who are not the owner of the property will be billed a \$100.00 deposit on the first billing statement.**

LANDLORD/MGMT CO. \_\_\_\_\_

OWNER/AGENT NAME \_\_\_\_\_

TELEPHONE # \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

MAILING INFORMATION \_\_\_\_\_  
*(Address, Suite, City, State, ZIP or PO BOX, City, State, ZIP)*

<b>*****FOR OFFICE USE ONLY*****</b>			
<u>\$100 DEPOSIT BILLED?</u>	<u>\$40 SAME DAY FEE APPLIES?</u>	<i>(Request Received through)</i>	
		IN-OFFICE <input type="checkbox"/>	PHONE <input type="checkbox"/> E-MAIL <input type="checkbox"/>
REMARKS _____			
METER READING _____		SERVICE COMPLETE DATE _____	