

**DAVENPORT UTILITY AUTHORITY
RESIDENTIAL UTILITY APPLICATION**

OCCUPANT: **Renter/Leaser** **Owner**

Service Address:	Start Date:
Applicant:	Co-Applicant
Driver's License:	Driver's License:
Date of Birth:	Date of Birth:
Social Security:	Social Security:
Phone Number:	Phone Number:
Email:	Email:

Mailing Address:		
Billing Preference: (Select your preference)	☐ Paper	☐ Email
Attachments REQUIRED:		
☐ Copy of photo identification Issued by government entity	☐ Property Deed &/or Power of Attorney	☐ Renter's Lease Agreement/Contract

IMPORTANT BILLING DEPOSIT INFORMATION

Residential Deposit (Homeowner)	Residential Deposit (Renter)	Garbage
Water/Sewer - \$110.00 One-time non-refundable set-up Fee - \$40.00	Water/Sewer - \$200.00 One-time non-refundable set-up Fee - \$40.00	Garbage - \$50.00 Additional Carts - \$15.00 One-time non-refundable set-up Fee - \$40.00

PREFERRED METHOD OF PAYMENT

☐ Check ☐ Credit Card ☐ Online Portal ☐ Automatic Bank Draft

TOWN OF DAVENPORT
P.O. BOX 279 DAVENPORT, LINCOLN COUNTY, OKLA. 74026 PHONE 918-377-2235



DIRECT PAYMENT VIA ACH AUTHORIZATION

Bank:	Savings Checking
Routing Number:	Account Number:

I authorize Davenport Utility Authority, hereinafter called "Company," to initiate debit entries to my account indicated below and the Financial Institution named below, hereinafter called "Financial Institution," to debit the same account. I acknowledge that the origination of ACH transactions to my account must comply with U.S law and NACHA Rules.

Print Name:	Signature:	Date:
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UTILITY CONTRACT

PLEASE INITIAL BESIDE EACH TERM OF BELOW

- ☐ Only the primary account holder is authorized to make changes to this account. Secondary account holders will only be authorized to obtain information. Any refunds issued by Davenport Utility Authority will be issued to the primary account holder.

- ☐ Payment is due the 15th of each month. Failure to receive a bill via the above designated preferred billing method does not constitute a waiver of penalty.

- ☐ A late penalty fee of 10% will be added after the due date if the account balance is not paid in full.

- ☐ Services will be disconnected for non-payment on or about the 16th of the following month. If the account is in cutoff status, the account will be charged a \$40 disconnect fee and an additional \$40 reconnect fee upon services being reinstated. If services are disconnected for non-payment trash containers will be collected.

- ☐ Accounts remaining unpaid 10 days after cutoff will be disconnected and deposits on file applied to the account. Reinstatement of accounts after disconnection will be required to pay a new deposit.

- ☐ All returned checks or ACH returns will be charged \$35.00 Two or more returns in a 6 month period will result in the account being removed from ACH draft.

- ☐ Account holders are allowed one payment agreement per 3 month period. Payment agreements must be made in person no later than 3:00pm on the 10th of the following billing month to avoid disconnection. Failure to honor payment agreement will make the account ineligible for any new payment agreement for 12 months.

By signing below, I certify that I have read, acknowledge and understand the information provided and attest that all information provided on this application is true and correct to the best of my knowledge.

Primary Account Holder Signature: _____ Date: _____

Secondary Account Holder Signature: _____ Date: _____

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OFFICE USE ONLY

Account Services: ☐ Water ☐ Sewer ☐ Garbage

Previous Customer? Yes No Transfer Account Deposit? Yes No Amount \$ _____

Deposit Date: _____ Amount \$ _____ Account Number: _____

Payment Type: ☐ Cash ☐ Check ☐ Credit/Debit Card

Beginning Reading: _____ Service Date: _____ Work Order Sent: _____

How many polycarts needed: 1 2 3

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