



TRANSFER OF EXISTING SERVICE

Riley County Public Works Dept.

6215 Tuttle Creek Blvd.

Manhattan, Kansas 66503

Phone: 785-537-6335

Fax: 785-565-6606

Email: rcpwbilling@gmail.com

Website: www.rileycountyks.gov

CHECK ONE

- Residential
 - Own
 - Rent
- Commercial
 - Own
 - Rent

CHECK ONE

- Deep Creek Sewer
- Hunter's Island Water
- Konza Water
- Lakeside Heights Sewer
- Moehlman Bottom Water
- Terra Heights Sewer
- University Park Water & Sewer

Type of Service: Water Only Sewer Only Combined Water & Sewer

APPLICANT(S)

Name of Applicant:

Name of Spouse or Roommate:

Service Address:

City, State, Zip:

Billing Address: (if different than service address)

Applicant Information

Employer:

Address:

City, State, Zip:

Work Phone:

Applicant Cell Phone:

Applicant Email:

Type of Statement: Paper OR Email

Spouse/Roommate Information

Employer:

Address:

City, State, Zip:

Work Phone:

Spouse/Roommate Cell Phone:

Spouse/Roommate Email:

Email for Statement:

OWNER/PROPERTY MANAGEMENT INFORMATION (if renting)

Owner/Property Management:

Address:

City, State, Zip:

Home Phone:

Work Phone:

ACTIVATION FEE

A **\$40.00** Activation Fee is due at the time of application. This fee is non-refundable.

SERVICE DEPOSIT

A **\$75.00** Service Deposit is due at the time of application. The Service Deposit will be refunded to Applicant(s) once the final bill is paid in full or it may be applied to your final bill. Initial _____

DATE TO PROVIDE SERVICE: _____

(you may be requested to be on site when your water service is connected)

Service dates are available Monday – Friday only. Service dates are not available on holidays.

Account holder/or recipient of services shall pay any and all charges related to the reasonable costs of collection of their account/service. The costs of collection include, but are not limited to, court costs, surcharges, attorney fees and collection agency fees, except such costs of collection may not include both attorney fees and collection fees.

I have received a copy of the current rates and regulations pertaining to the aforementioned water/wastewater district and agree to abide by all of the conditions set forth therein.

Signed: _____

Date: _____

OFFICE USE ONLY

Service ID #

Service Deposit: Date Paid

Activation Fee: Date Paid

Check #

Service Deposit Refunded

Date:

Service Deposit Applied to Final Bill