

Account # \_\_\_\_\_

# CITY OF OSCEOLA

350 N. State, P.O. Box 701  
Osceola, NE 68651  
402-747-3411

## SNOWBIRD DISCONNECTION OF UTILITY SERVICE

Name(s) Utilities Currently In: \_\_\_\_\_

Forwarding Address: \_\_\_\_\_

Location to be disconnected: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Date of Disconnection: \_\_\_\_\_

Approximate Date of Reconnection: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant(s)

\_\_\_\_\_  
Date

\_\_\_\_\_  
City Employee

\_\_\_\_\_  
Date

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**For Utility Office Use:**

DISCONNECTION

Contact Water Dept. to shut off at curb: Completed \_\_\_\_ By \_\_\_\_\_ Date/Time \_\_\_\_\_

Prorate \_\_\_\_% in Maint./Billing-Rates (Rates still active until EOM bills processed):

Completed \_\_\_\_ By \_\_\_\_\_ Date \_\_\_\_\_

After EOM UB complete, edit rates to inactive status:

Completed \_\_\_\_ By \_\_\_\_\_ Date \_\_\_\_\_

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Customer requested reconnection on \_\_\_\_\_ By \_\_\_\_\_ (phone/in person) Initials \_\_\_\_\_

RECONNECTION

Contact Water Dept. to turn on at curb: Completed \_\_\_\_ By \_\_\_\_\_ Date/Time \_\_\_\_\_

Prorate \_\_\_\_% in Maint./Billing-Rates & edit rates to active status:

Completed \_\_\_\_ By \_\_\_\_\_ Date \_\_\_\_\_

Add \$30 Reconnection Fee thru Adjustments:

Completed \_\_\_\_ By \_\_\_\_\_ Date \_\_\_\_\_