



Hoopeton Municipal Building

# City of Hoopeton

301 W. Main St.  
Hoopeton, Il 60942  
(217) 283-5320  
Fax: (217) 283-7965

## WATER SERVICE ACTIVATION FORM

Please complete form, make sure to write legibly.

Turn On Date: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Service Address: \_\_\_\_\_ Apt#: \_\_\_\_\_

Please Circle One: **OWN / RENT** If rental, list owner's name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

(Only if bill goes to an address different than service address)

Have you had water service in Hoopeton previously? **YES / NO**

Previous Address \_\_\_\_\_

Date of Birth: \_\_\_\_\_

SS#: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_ Expiration: \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

### List two references (relatives) with address and phone number:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

### NAME OF ALL DEPENDENTS UNDER AGE 18 RESIDING IN HOUSEHOLD:

\_\_\_\_\_  
\_\_\_\_\_

**The City of Hoopeton reserves the right to use any of the above information in case of default.**

Signature: \_\_\_\_\_

Deposit Amount: \_\_\_\_\_

Date: \_\_\_\_\_

Check/Cash: \_\_\_\_\_