

# City of Groton



South Dakota  
Growing Families & Opportunities

120 North Main Street PO Box 587 Phone 605-397-8422  
Groton, South Dakota 57445-0587

## APPLICATION FOR UTILITY SERVICE

Application for service at \_\_\_\_\_

Date Effective \_\_\_\_\_

Home Phone # \_\_\_\_\_

Your Name \_\_\_\_\_ Soc Sec # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Your Email \_\_\_\_\_ Your Cell Phone \_\_\_\_\_

Your Employer \_\_\_\_\_ Employer's Phone # \_\_\_\_\_

Employer's Address \_\_\_\_\_

Spouse's Name \_\_\_\_\_ Soc Sec # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Spouse's Email \_\_\_\_\_ Spouse's Cell Phone \_\_\_\_\_

Spouse's Employer \_\_\_\_\_ Employer's Phone # \_\_\_\_\_

Employer's Address \_\_\_\_\_

### Billing Address:

Street or Box # \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

PRIMARY PHONE # TO BE USED FOR NOTIFICATIONS: \_\_\_\_\_

PRIMARY EMAIL TO BE USED FOR NOTIFICATIONS: \_\_\_\_\_

Name of nearest relative **not** living with you: \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Relationship \_\_\_\_\_

Deposit Amt \_\_\_\_\_ Date Pd \_\_\_\_\_

**E-MAIL APPLICATION TO CITY.KELLIE@NVC.NET**  
**OR PRINT MAIL/DROP OFF TO GROTON CITY HALL**

***ALL DOGS ARE REQUIRED TO BE LICENSED!***