

City of Haviland

109 N. Main
 PO Box 264
 Haviland, KS 67056-0264

Phone: 620-862-5317
 Fax: 620-862-5897
 Email: cityhall@havilandks.gov
 Website: havilandks.gov

SERVICE APPLICATION

REQUIRED: Driver's License, Social Security Number, Complete Application, Connect Fee
Utility Payments are due on the 20th of the month to avoid late fees (Ordinance #400)
Water Rate-\$30/2,000gal + \$4/1000gal, Sewer Rate- \$45, Trash-15.50/1 can, \$22.25/2 Cans

Name	Date Requested
Street Address	Mailing Address
OWN _____ RENT _____	Landlord
Social Security #	Driver's License #
Home/Cell Phone #'s	Email Address
Employer	Work Phone #

Spouse Information	
Name	Social Security #
Driver's License #	Email Address
Employer	Work Phone #
Cell Phone #	

Pet Information-License Required	Dog Owner __Yes__ No	Cat Owner __Yes__ No
Breed _____ M ___ F	Pet's Name	
Breed _____ M ___ F	Pet's Name	
Breed _____ M ___ F	Pet's Name	
Breed _____ M ___ F	Pet's Name	

All dogs and cats are required to be licensed with the City of Haviland. Please bring proof of rabies vaccination to the City office to license your dog(s) and/or cat(s). (Reference Ordinance No. 415) \$1 if altered/\$3 if not altered.

 Signature of Person Requesting Service

Account # _____

A non-refundable \$50 service connection fee is required for all new customers.

CASH ___ CK # ___ Money Order ___ Date Paid _____