CITY OF BELVUE KS BULK WATER SALE APPLICATION 1000 Gal Minimum

SERVICE REQUEST DA	TE				
SERVICE LOCATION					
MAILING ADDRESS (IF	DIFFERENT FRO	M SERVICE LO	CATION)		
APPLICANT'S NAME				TELE#	() Home () Cell
	FIRST	MI	LAST		
NAME OF BUSINESS IF	COMMERCIAL A	ACCOUNT			
AMOUNT OF WATER N	EEDED (THOUSA	ND GAL)			
it reserves the right to	limit bulk wate other customers	r sales both as . I also unders	to amount and catand that I will be	vater requested in a time lelivery time as necessar charged a \$30 setup fed sand gallons.	ry to provide
Signature of Applicant				Date	
For City Use:					
Start read on meter:			_ End Read of Mete	er	
Total Usage			_ Total of BIII		