



Please print clearly

Company Information

Company Name _____ Service Start Date _____
 Service Address _____ Business Telephone Number _____
 Mailing Address (if different than service address) _____ Business Fax Number _____
 City _____ State _____ Zip Code _____
 Type of Business: Sole proprietor Partnership LLC Corporation Other _____
 Federal Tax ID Number _____ Tax exempt business? Yes No If tax exempt, you must provide a copy of your tax exempt certificate. Date Received: _____

Account Contact Person

Contact Name _____ Contact Telephone Number _____

Property Information

Property will be/is: Owned Leased

Property Owner Name (if different than above) _____ Property Owner Telephone Number _____
 Mailing Address _____ City _____ State _____ Zip Code _____

Applicant Signature

I hereby request Shakopee Public Utilities (SPUC) to furnish utility service to the above service address. I understand that a deposit will be required to begin service. Additionally, an account set-up fee of \$15.00 is required, which will be applied to my first billing statement from SPUC.

I understand that utility payments shall be paid by the due date, or a penalty fee of 5% will be added to the unpaid balance.

Applicant Signature _____ Date _____

Applicant Name _____ Title _____

Return application form to:

Shakopee Public Utilities • PO Box 470, 255 Sarazin Street, Shakopee, MN 55379 • Phone: 952.445.1988 • fax 952.445.7767

SPU USE ONLY

DEPOSIT REQUIRED	Today's Date	Account Number
Deposit Amount	<input type="checkbox"/> Check <input type="checkbox"/> Letter of Credit <input type="checkbox"/> Surety Bond	
Check #	Receipt #	Location Number
Date Paid	Deposit calculated by:	
SPU CSR Initials	Notes	