

IOWA LAKES REGIONAL WATER

Sign Up Form

SERVICE ADDRESS

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Township: _____

Section: _____

Mailing address is the same as the service address.

Please check whether you are the owner or tenant of the above listed service address:

Owner

Tenant

If you are the tenant, please list the owner's contact information.

Owner's Name: _____

Address: _____

Phone: _____

Amount Paid: _____

Customer Signature: _____

MAILING ADDRESS

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

REQUEST FOR INFORMATION

This portion is voluntary.

Ethnicity (please select only one):

- I am White, Hispanic/Latino
 I am White, Not Hispanic/Latino

Male Female

Race (please select only one):

- American Indian/Alaskan Native
 Asian
 Black or African America
 Native hawaiian or Other Pacific Islander
 White (includes Hispanic)
 Other



OFFICE USE ONLY

Project Sponsor: *Iowa Lakes Regional Water*

Received by: _____

Receipt Number: _____

Date Received: _____

Iowa Lakes Regional Water

Working with town and country to provide safe, quality, drinking water!

P.O. Box 555 ■ Spencer, Iowa 51301 ■ Phone: 712-262-8847 ■ Fax: 712-262-8241 ■ www.ilrw.org

Iowa Lakes Regional Water is an equal opportunity provider and employer.