



**VILLAGE OF PENDER**

P.O. Box 549  
614 Main Street  
Pender, Nebraska 68047  
Office: 402-385-3232  
Fax: 402-385-2349  
E-mail: clerk@villageofpender.com



**APPLICATION FOR UTILITY SERVICE**

Read-In Date: _____
---------------------

Name: \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number (Cell) \_\_\_\_\_ (Work) \_\_\_\_\_  
E-mail address: \_\_\_\_\_  
Current Employer: \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_  
In Case of Emergency Notify: \_\_\_\_\_ Phone: \_\_\_\_\_

Third Party Notification (Property Owner Information)

According to Nebraska State Statute 70-1607, you have the right to list a Third Party on your record. The Village may notify my landlord or the third party listed below of any proposed discontinuance of Utility services.

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

***A deposit is required for all new customers. It is the CUSTOMERS' responsibility to inform the Utility Office of beginning and ending dates of Service. I understand all of the customer requirements and agree to pay all charges billed in my name.***

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_/\_\_\_/\_\_\_

For Office Use Only		
Deposit Amount: _____	Date Paid: _____	Payment Method: _____