## VILLAGE OF OAKDALE

## **APPLICATION FOR WATER SERVICE**

Date:					
Name Of Applicant:					
Mailing Address:					
Telephone Number:					
Description of Premi	ises/Physical A	ddress:			
Owner:					
Owner Name, Addre	ess and Phone	Number (Rent	ers Only):		
The above applicant described premises	has applied fo	r water service	e to be conne		- e above-
Signature of Applica					
 Village Clerk			Paid with: Check	Cash	МО
Village Clerk			CHECK	_ Casii	_ 101.0
Date:	First Met	er Reading:		-	
Date service was tur	ned on:				

Village of Oakdale PO Box 10 Oakdale, NE 68761 PHONE 402-776-2484