

TOWN OF MINDEN
1604 ESMERALDA AVE STE. 101
MINDEN, NV 89423
PHONE 775-782-5976 FAX 775-782-5287

**AGREEMENT AND REQUEST
FOR WATER AND TRASH SERVICE**

The undersigned property owner(s) within the Town of Minden do hereby request to be furnished water and trash service from the Town of Minden, upon the terms and conditions, or under the rules and regulations, as may from time to time be adopted, changed or modified. The undersigned agrees to pay any and all connection charges and rates for the water and trash service as established.

The undersigned further agrees to pay reasonable attorney fees and court costs incurred by the Town of Minden in enforcing any of the rules and regulations of the Town or in collecting any sums owed to the Town.

Legal Owner Name: _____

Physical Address: _____

Mailing Address (if different than above): _____

Phone Number: _____

Email: _____

Will billing and correspondence be sent to a tenant/property manager? Yes / No

If yes, please complete Utility Billing Agreement Form.

Legal Owner Signature: _____ Date: _____

Office Use Only

ACT # _____
