

**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: \_\_\_\_\_

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**Office Use Only**

ACT # \_\_\_\_\_

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