



8200 County Road 116, Corcoran, MN 55340

763/420-2288 www.ci.corcoran.mn.us

CITY OF CORCORAN APPLICATION FOR UTILITY SERVICES

Service Address: _____

Owner Renter Closing Date: _____

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (Optional) _____ Cell Phone: (_____)

Email Address: (Optional) _____

In consideration of the City of Corcoran providing utility services of water, sewer, and storm water, the undersigned being the owner(s) and/or renter(s) of the real property listed above, affirms that all information on this application is true and correct. I/We will assume the full responsibility of all financial obligations at the above address. I/We have been informed that in the event of non-payment for any of the above-referenced utility services, the City of Corcoran may assess said unpaid charges, penalties, and fees against the real property so served pursuant to Corcoran Code of Ordinances, Chapter 51. The City of Corcoran shall assess said unpaid charges by certifying the amount to the Hennepin County Auditor for collection as a real property tax.

Please be aware if the prior owner of your property leaves an unpaid balance, this amount will be assessed to the property for collection with taxes. To avoid this, please contact your title company to verify the final balance will be paid. You may contact the City to verify payment has been made.

This application will remain in effect until I/we have notified the City in writing to discontinue service. I/We agree to comply with the City Ordinances that govern the use of these utilities.

I/We agree to permit the authorized agents of the City free access to premises for the purpose of inspection, repair, replacement or service to the water meter and its components as needed.

Please email the signed Application for Utility Services to utilitybilling@ci.corcoran.mn.us, or print out and mail to City of Corcoran, 8200 County Road 116, Corcoran, MN 55340.

Signature of Owner: _____ Date: _____

Printed Name(s): _____

Signature of Renter(s): _____ Date: _____

Printed Name(s): _____