



City of Neosho  
 203 E. Main Street  
 Neosho, MO 64850  
 417-451-8060  
 waterlicense@neoshomo.gov

## Business Water Account Application

*Please email completed applications to [waterlicense@neoshomo.gov](mailto:waterlicense@neoshomo.gov)*

APPLICANT INFORMATION

Business Name: \_\_\_\_\_ Date: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Owner's Cell Phone: \_\_\_\_\_

Local Manager: \_\_\_\_\_ Manager's Cell Phone: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Business Email: \_\_\_\_\_

Most Recent Prior Address: \_\_\_\_\_

Federal Tax I.D. #: \_\_\_\_\_ Nature/Type of Business: \_\_\_\_\_

NEW SERVICE INFORMATION

NEW Service Address: \_\_\_\_\_

Address for BILLING: \_\_\_\_\_

Date to START Service: \_\_\_\_\_ Is property rented or owned?  Rented  Owned

If rented, Landlord's Name: \_\_\_\_\_

Landlord's Address: \_\_\_\_\_

Landlord's Phone: \_\_\_\_\_ Landlord's Cell Phone: \_\_\_\_\_

OLD/EXISTING SERVICE

Do you currently have Neosho City Water?  Yes  No

Address you currently have service: \_\_\_\_\_

Date you want service stopped at old address:  
 Do not stop service  Date to stop service at old address: \_\_\_\_\_

Are you now on AutoPay:  Yes  No (attach voided check to begin AutoPay)

Do you want to continue AutoPay?  Yes (attach voided check)  No

Application completed by (signature): \_\_\_\_\_

**Water bills are mailed the last working day of every month and are due the 15<sup>th</sup> of the following month. If the 15<sup>th</sup> falls on a weekend or holiday, bills are due the next business day. Late charges are assessed at 12% of the water amount and 12% of the sewer amount. If turned off for non-pay, a \$20 reconnect fee will be charged. If there is an emergency after hours, call Newton County Central Dispatch at 417-451-8333.**

| FOR OFFICE USE ONLY   |   |   |            |
|---|---|---|------------|
| Inside/Outside of City Limits: <input type="checkbox"/> INSIDE <input type="checkbox"/> OUTSIDE |   | Service Provided: <input type="checkbox"/> WATER <input type="checkbox"/> SEWER |            |
| Billing Cycle: _____  |   |   |            |
| Verify is there is a prior balance due:   | \$ _____  | \$ _____  | <b>UI</b>  |
| Application Fee ( <i>do not charge for change of service address</i> ) <b>NON-REFUNDABLE:</b>   | \$15.00   | \$ _____  | <b>WF</b>  |
| Business Meter Deposit ( <i>\$100 for 2" &amp; under; \$150 for over 2"</i> ):                  | \$100.00/\$150.00   | \$ _____  | <b>DEP</b> |
| TOTAL DUE: \$ _____   | SEND COPY OF WATER APP TO CITY LICENSE CLERK & INITIAL: _____ |   |            |