

# WELCOME TO THE CITY OF KEENE

## **NEW WATER ACCOUNT SERVICE INSTRUCTIONS:**

1. COPY OF DRIVER'S LICENSE / STATE ISSUED IDENTIFICATION
2. COPY OF LEASE/RENTAL AGREEMENT OR PROOF OF OWNERSHIP
3. CHECK, MONEY ORDER, CASH OR CARD IN PERSON/MAIL FOR DEPOSIT OF \$200 OR \$100 WITH LETTER OF CREDIT FROM UTILITY COMPANY WITHIN LAST 12 MONTHS WHICH INCLUDES PROOF OF NO LATE FEES AND DISCONNECTIONS.
4. IF YOU NEED TO EMAIL OR FAX ANY OF THE ABOVE. PLEASE EMAIL [UTILITIES@KEENETX.COM](mailto:UTILITIES@KEENETX.COM) FAX 817-556-2060
5. ALL ITEMS MENTIONED MUST BE PROVIDED AT TIME OF SERVICE REQUEST. WATER WILL NOT BE CONNECTED WITHOUT ALL DOCUMENTATION.

**TO HAVE WATER TURNED ON SAME DAY WE MUST RECEIVE ALL PAPERWORK BY 3:00 PM. AFTER 3:00 PM THERE WILL BE A \$35.00 ON CALL FEE TO HAVE ON CALL COME OUT AND CONNECT SERVICE.**



Letter of Credit Rcvd:	
Needs Trash Can:	
Deposit Paid:	\$

**Water Utilities – Utility Service Application & Agreement**

1000 N. Old Betsy Rd\* Cleburne, Texas \* 76031\* 817-641-3336 \* Facsimile 817-556-2060

**PLEASE PRINT CLEARLY**

Requested Service Date: \_\_\_\_\_  Residential  Non-Residential

Own (Proof of ownership required)  Rent (copy of lease or rental agreement required)

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

Mailing Address: \_\_\_\_\_

**Applicant Information:**

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ DL# or ID #: \_\_\_\_\_ DL/ID State: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Email (PLEASE PRINT CLEARLY):** \_\_\_\_\_

**Spouse Information**

Spouse Name: \_\_\_\_\_ Spouse Date of Birth: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Emergency Contact Information**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Landlord Information**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**I understand and agree to the terms and conditions.**

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<i>Internal Use Only</i>	
<i>Processed By:</i>	
<i>New acct #:</i>	

## **Terms and Conditions of Agreement**

### **New Account Deposits**

Upon establishment of an account, the applicant shall have the choice either to pay a deposit of \$200.00 without a letter of good standing or provide a letter of good standing from another existing utility account demonstrating the account holder is current with all payments within a twelve (12) month period and pay a reduced deposit of \$100.00. Outside city limits the deposit is 1.5 times the amount listed. Customers whose applications are submitted after 1 p.m. and processed by the City shall be turned on the same day upon payment of a \$35.00 Connection Fee.

### **Due Dates and Late Fees**

Payments are due in full no later than 5 p.m. on the seventh (7<sup>th</sup>) day of the month. After 5 p.m. a 10% late payment fee shall be added. Any payments placed in drop box, mailed, by phone or paid online after 5 p.m. are considered late and subject to late fee.

### **Administration Fee**

If payment is not received by 5 p.m. on the twentieth (20<sup>th</sup>) day of the month, an Administration Fee of \$50.00 shall be assessed to the account and subject to disconnection of service.

### **Social Security Customers**

Customers that rely on social security payments and their payment arrives after the due date may apply to be placed on a list that waives the late penalty, upon providing proof of the payment arrival date, so long as the account balance consists of only the currently billed amounts.

### **Payment Extensions**

Customers can only request a payment extension once every six (6) months for a maximum of ten (10) calendar days. A customer's past compliance with such allowances will dictate whether a customer will be allowed additional time and is subject to approval of the Finance Department.

### **Disconnection Additional Deposits**

An additional deposit amount shall be charged each time a customer's service is disconnected for non-payment more than once in any twelve (12) months.

### **Leak Adjustments**

When a customer has a leak on the customer's side of the meter, the City will work with the customer on the leak adjustment if applicable. Customer's requesting an adjustment will need to complete a Leak Adjustment form and will be required to have a receipt from a licensed plumber or proof of purchase for apparatus for the repair. Without appropriate document the request shall be denied. Adjustments do NOT apply to leaking faucets, toilets, shower heads, or any like fixtures.

### **Outstanding Debt Search**

An outstanding debt search for a new account will be initiated. If any unpaid debt on any account(s) under the applicant's name or any person(s) on the lease is discovered, it will be applied to the account. You will be required to pay the full amount at the time of activation. If for any reason an outstanding balance is discovered after the time of activation, the full amount will be added to your bill. Any non-payment will cause utilities to be disconnected.

**I understand and agree to the terms and conditions.**

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Keene, TX**

**City of Keene**

1000 N Old Betsy Rd  
Cleburne, TX 76031  
817-641-3336

Sign up online at  
keenetx.regroup.com  
or fill out this form and  
return it to us.

**Email Address:**

*(Used to create an account)*

**Name:**

**Phone #:**

**Address:**

*Must have an address to receive targeted, location-specific notifications.*

Indicate which types of alerts that you would like to receive:



<b>Alert Type</b>	<b>Text</b>	<b>Voice</b>	<b>Email</b>
Emergency Alerts			
Community Notifications			
Fire Warning			
Flash Flood Warning			
Freeze Warning			
Severe Thunderstorm Warning			
Tornado Warning			





**Registration Information for Dogs/Cats (\$10.00 per pet)**

**Keene Animal Services**

**§ 94.42 LICENSE. (\$10.00 PER ANIMAL REGISTERED W/PROOF OF RABIES CERTIFICATE)**

(A) The only animals within the city required to be licensed with the city are dogs and cats.

(B) All city licenses issued by the Animal Control Department shall expire 12 months from the date they were issued. No license shall be issued for any period greater than one year. Persons requesting a license for their animals shall provide proof that the animals are currently vaccinated. A vaccination certificate issued by a veterinarian licensed by the state shall be the only acceptable proof of vaccination. Once it is established that the animals are currently vaccinated, a license shall be issued. Anyone moving into the city shall obtain a city license for their animals within 90 days after moving into the city.

(C) Upon proof of rabies vaccination, the Animal Control Department shall issue a receipt and a color-coded numbered metal tag. The tag shall be securely fastened to their animal by means of a collar or harness at all times. The Animal Control Department shall keep a register of all licenses issued in which shall be entered the name of the owner of the animal; description of the animal to include breed, color(s), sex and age; address and phone number of owner; date of vaccination; license tag number; date issued; and date of expiration. It shall be unlawful for any person to remove any tag issued under the provisions of this section from any animal without the written consent of the owner. (2001 Code, § 4-68) (Ord. passed 11-19-1987; Ord. 1992-17, passed 7-2-1992) Penalty, see § [10.99](#)

**§ 94.44 NUMBER OF DOGS AND CATS ALLOWED.**

It shall be unlawful to keep or harbor more than four dogs and/or four cats six months of age or older on any premises within the city.

(2001 Code, § 4-70) (Ord. passed 11-19-1987) Penalty, see § [10.99](#)

**OWNER INFORMATION**

Registration Application for Dogs/Cats

Renewal: \_\_\_ First Time: \_\_\_

Name (Print Clearly)

Date

Address

City

State

Zip

Primary Phone

Secondary Phone

E-mail (Optional)

Driver's License or ID

State

Expiration Date of Birth

**PET INFORMATION ON BACK**

*PET INFORMATION*

<b>Pet Name:</b>					
<b>Species:</b>	(dog) (cat)	(dog) (cat)	(dog) (cat)	(dog) (cat)	(dog) (cat)
<b>Breed:</b>					
<b>Gender:</b>	<input type="checkbox"/> Male	<input type="checkbox"/> Male	<input type="checkbox"/> Male	<input type="checkbox"/> Male	<input type="checkbox"/> Male
	<input type="checkbox"/> Female	<input type="checkbox"/> Female	<input type="checkbox"/> Female	<input type="checkbox"/> Female	<input type="checkbox"/> Female
	<input type="checkbox"/> Sterilized	<input type="checkbox"/> Sterilized	<input type="checkbox"/> Sterilized	<input type="checkbox"/> Sterilized	<input type="checkbox"/> Sterilized
<b>Color:</b>					
<b>Age:</b>					
<b>Size:</b>	<input type="checkbox"/> Small	<input type="checkbox"/> Small	<input type="checkbox"/> Small	<input type="checkbox"/> Small	<input type="checkbox"/> Small
	<input type="checkbox"/> Medium	<input type="checkbox"/> Medium	<input type="checkbox"/> Medium	<input type="checkbox"/> Medium	<input type="checkbox"/> Medium
	<input type="checkbox"/> Large	<input type="checkbox"/> Large	<input type="checkbox"/> Large	<input type="checkbox"/> Large	<input type="checkbox"/> Large
<b>Rabies #:</b>					
<b>Date:</b>					
<b>Veterinarian</b>					
<b>Vet Phone#</b>					
<b>City License #</b>					
<b>Animal notes:</b>					