

Lyon & Sioux Rural Water System, Inc.
1107 1st Ave., P.O. Box 309 Rock Rapids, IA 51246
712-472-3755 * Fax 712-472-4529
Website: www.lyonsiouxruralwater.com

**Please Return
This Form**

WATER USAGE STATEMENT FOR TAX PURPOSE

Each water user is asked to fill out and return this form so LSRW can apply the correct tax rate for your water usage. If this form is not returned your tax rate will be for the total usage. Iowa law requires this form be on file for any exemptions.

When water is sold to farmers and other agricultural purchasers and when used directly as drinking water for livestock and poultry products for market or in other facets of agriculture production, the water purchased is exempt from the imposition of excise tax. Water used for other purposes such as household use, sanitation or swimming pools is subject to the imposition of the 6% excise tax. Water used for both household and ag related usage will be billed 6% excise tax only on the 1st 5,000 gallons used. For more information regarding the Water Excise Tax please visit: <https://tax.iowa.gov/WET>

Name: _____ Account Number ____ - ____ - ____

Service Address: _____

City: _____ State: _____ Zip: _____

Mailing Address if different than above: _____

Home Phone: _____ Cell Phone: _____ Email: _____

I certify that the following is a true and accurate disclosure of the water usage on the location listed above. I agree to promptly notify Lyon & Sioux Rural Water if there is a change in my water usage.

(Please check the appropriate box for your type of usage.)

- Water used for home/domestic or other similar use only.
- Water used for home/domestic or other similar uses as well as the continual use for the express consumption by livestock and crops for agriculture production.
- Water used only for the express consumption by livestock and crops for agricultural production.

Signed: _____ Date: _____

“The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.” **Ethnicity:** Hispanic or Latino _____ Not Hispanic or Latino _____

Race: Mark one or more: White _____ Black or African American _____ Asian _____
American Indian/Alaska Native _____ Native Hawaiian or Other Pacific Islander _____

Gender: Male _____ Female _____

An Equal Opportunity Provider and Employer