

NOTES:



1902 Zenith Ave., Spirit Lake, IA 51360
Phone: 712-336-2175 Fax: 712-336-3397

Please complete this form and return it to us via **fax** (712-336-3397) or **e-mail** (visit our website at www.lakesphc.com; click on "Services" then "Cottage Care" and follow the instructions), or in the enclosed, self-addressed envelope **at least TWO WEEKS prior to your arrival.**

We will schedule your opening for a Monday, Tuesday, Wednesday, Thursday, or Friday of the first full week before your arrival. **Be sure to contact your utility company to have your electricity & gas on by then or we will not be able to open.**

ARRIVAL DATE: _____ **OPEN WEEK OF:** _____

(Monday's date of the week *prior* to your arrival)

- Turn on heat, set T-stat at _____ degrees Heat is on, set T-stat at _____ degrees
- Turn electricity on at panel Leave electricity off
- Turn off heat There is no heat source
- Wash Machine Dishwasher
- Water Heater--If more than one, how many? _____
- Toilet(s)—If more than one, how many? _____
- Ice maker Lake or well pump Water softener Sewage pump
- Water dispenser R.O. System

Please see your cover letter for an explanation of additional charges.

Who is your NG or LP gas provider (if applicable) _____

Do you have a rural water provider? If so, indicate which one:

- ILRW (Iowa Lakes Regional Water (712-262-8847) Osceola Rural Water (712-735-6795)

*****Remember, your provider requires you to notify them of your arrival date.**

Summer Home Location:

Billing Address:

Phone: _____

e-mail: _____

- Please send **CLOSING** letter to: Summer address
 Billing address