

APPLICATION FOR WATER SERVICE

Date: _____ Time: _____ Taken By: _____ Date Wanted: _____

Account Name: _____ Account No.: _____

Service Address: _____ Zip: _____

Business Name: _____

Owners Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Social Security Number(s): _____ - _____ - _____

PHONE

Bus. () - _____

Owner () - _____

Contractor () - _____

You Are Hereby Notified & Authorized To Install The Following

ROM Meter Box Curb Meter Basement Meter
 Fire Hydrant(s) Sprinkling System Lines Water Tap Must Be Marked Where Wanted

#: _____ Size Line: _____

City Limits Outside Street Paved Unpaved

Line Extension No. of Feet: _____ Lot No.: _____

Addition: _____ Lot Footage: _____

Cost: _____ Paid _____ Date _____ 20 _____
 _____ Receipt No.(s): _____

I understand any charges I owe for said services and agree they shall be paid before service is turned on.

I understand the charges for said services and accept responsibility for payments when they are billed.

Signature of Applicant

Customer Signature

Remarks and Information:

Installation Completed On: _____ 20 _____
 And is Located as Follows:

Date Signed: _____ 20 _____ Superintendent: _____