



WATER SUBSCRIPTION CONTRACT

Name: _____
LAST FIRST MIDDLE INITIAL

Service Address: _____
STREET

CITY STATE ZIP

Mailing Address: _____
STREET

CITY STATE ZIP

Employer: _____ Home Phone #: _____

Spouse's Name: _____ Work Phone #: _____
Cell Phone #: _____

Email Address: _____

Rent () Own () Owner's Name: _____

I have received a copy of the Water Service Accounts Agreement on file at the Authority's offices which is incorporated herein by reference and made a part of this Contract. In consideration of receiving water service I hereby agree to all terms and conditions set forth in said Water Service Accounts Agreement. I understand that the Authority is relying on accuracy and completeness of information given by me in connection with this Application for water service. I authorize the Authority to apply for and receive credit information, and I also know that my deposit will be based on previous credit history. Executed under hand and seal the date set forth below.

DATE: _____ **WATER CUSTOMER'S SIGNATURE:** _____

Account # _____ Location # _____ Date: _____

Taken By: _____ Subdivision: _____ Lot # _____

Start Up Reading: _____ Meter #: _____

Start Up Date: _____ Register #: _____

Meter Fee \$: _____ Deposit \$: _____ Administrative Fee \$: _____ Total \$: _____