

## NEW SERVICE APPLICATION WATERWORKS

APPLICANT NAME							
SERVICE IS:	PROPERTY IS:			LOCATED:			
Residential:	Owned		(\$50)*	Inside City Limits:			
Commercial:	Rented:		(\$75)*	Outside City Limits	<b>::</b>		
*	This is a New Serv	ice Conr	nection F	ee ONLY, r	ot a refundable deposit.		
You are re	•				Proof of Ownership or a co Il be connected.	py of	
SERVICE ADDRESS			CITY / STATE			ZIP	
MAILING ADDRESS				CITY / STATE ZIP			
PHONE NUMBER (HOME)				PHONE NUMBER (CELL)			
PLACE OF EMPLOYMENT				WORK PHONE			
SOCIAL SECURITY NUMBER				DESIRED SERVICE START DATE			
E-Bill: YES	NO EN	/AIL AD	DRESS:			<u>-</u>	
Is there an alternate water source? YES NO				If YES, w	hat source?		
Is this service for an Irrigation / Sprinkler System?				YES	NO		
Is this service for household use? YES NO				If NO, ex	If NO, explain?		
Is a Backflow Preventer required? YES NO							
Is a Grease Trap required? YES			NO				
	y of the "Rules a	and Reg	ulations	" along w	icated above at the addreith a "Title IV Program". vice.		
SIGNATURE OF APPLICANT				D/	ATE		

Print Form