



No. 15231

APPLICATION FOR WATER SERVICE

Date: _____ Certificate of Occupancy number: _____

Account number: _____ Deposit: _____

Service address: _____

Date service will start: _____

Applicant Information

Business or Residential account name: _____

Applicant name: _____

Mailing address: _____

Applicant phone number: _____ Alternate phone number: _____

Driver License number: _____ SSN/Business Tax ID _____

Spouse or Other Occupant Information

Name: _____

Phone number: _____ Alternate phone number: _____

Driver license number: _____ Social Security number: _____

Property Owner Information

Name: _____

Address: _____

Phone number: _____

Have you had service in White Settlement before? _____

If yes, under what name: _____

At what address? _____

_____ Check here if you want your name and address withheld from public inquiry

I, _____ do hereby affirm and certify that I am the legal tenant/owner of the above premise. Deposit represents a security for water, sewer and other monthly charges which may become due to the City of White Settlement.

ALL SERVICES PROVIDED ARE BILLED A MONTHLY MINIMUM FEE REGARDLESS OF USAGE OR OCCUPANCY. I understand that I am responsible for all monthly charges, FAILURE TO RECEIVE A BILL DOES NOT EXEMPT ME FROM MONTHLY CHARGES OR LATE FEES.

Customer Signature

Date