



**Residential Application
For Water, Sewer and Trash Services**

Date of service: _____

For service at: _____

WO # _____
CUST. RCPT. # _____
ACCOUNT # _____

Name: _____

SS#: _____

Spouse: _____

SS#: _____

Mailing address: _____
(IF DIFFERENT FROM SERVICE ADDRESS)

Home phone: _____ Business or Cell: _____

Employer: _____ Phone #: _____

Employer address: _____

If rental property – owner's name: _____

Owner address: _____ Phone #: _____

I am (check one): Owner _____ Tenant _____ Agent _____

I own a dog (check one): Yes _____ No _____

The above information is true to the best of my knowledge and I understand that falsification of the information contained herewith may result in the termination of my water service.

Date: _____

Signature: _____

