**NEW SERVICE APPLICATION FOR RESIDENTIAL CUSTOMERS**

1. **GENERAL INFORMATION**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name:** | | | | **DOB: Month** | | | | **Day** | **Year** |
| **Service Address:** | | | | | | **Billing Address:** | | | |
|  | | | | | |  | | | |
| **Email Address:** | | | | | | **Home Phone:**  **( ) -** | **Cell Phone:**  **( ) -** | | |
| **Service Type:**  Water  Sewer  Gas | **Property Type:**  Owner  Renter | **Residence Type:**  House  Mobile Home  Apartment | **Previous Customer?**  Yes  No | | **Is This A New Property That Requires Tap Fees?**  Yes  No | | | | |
| **All Others Residing At This Address:** | | | | | | | | | |
|  | | | | | | | | | |

|  |  |
| --- | --- |
| **Name:** | **Phone:**  **( ) -** |
| **Address:** | |

1. **LANDLORD INFORMATION (IF YOU OWN THE PROPERTY, SKIP THIS PORTION)**
2. **NEAREST RELATIVE NOT LIVING WITH YOU**

**(USED AS AN ALTERNATE POINT OF CONTACT)**

|  |  |  |
| --- | --- | --- |
| **Name:** | **Relationship:** | |
| **Address:** | | **Phone Number:** |