

This information will be used to set up your account and can be helpful if we need to notify you of an emergency water shutdown.

Is this transfer for Residential	or Commercial	service?
Service Start Date Ov	vn or Rent (If re	ented, provide a copy of lease)
New Service Address:		
Name: Last Name, First Name, MI (c		,
New Mailing Address:		
Primary & Secondary Telephone #:		
Primary #	Secondary #_	
E-mail Address:		
SSN:		
Driver's License #:		<u> </u>
Name of person who can also conduc	t business on account:	
If Business enter Federal ID #:		(If Business enter owner info)
TRANSFER FROM		
Service Address:		
Turn off Date		
Applicant's Signature:	Dat	te:
WATER TURN ON AGREEMENT		
ACH #		
INFORMED CUSTOMER OF \$35 FE	E	
INFORM CUSTOMER OF GARBAGI	E DAYS	