Mayor, Matthew Moore

Recorder, Crystal Moore

## **APPLICATION FOR WATER & SEWER SERVICE**

Name:	Date:
Social Security #:	State ID #:
Mailing Address:	
Phone Number:	_
Physical Address and DETAILED Description:	
Do you RENT OWN ?	
If you are not the property owner, landlord information is REQUIRED.	
Landlord Name:	Phone:
Signature:	
(OFFICE USE)	
CONNECT FEE:	ACCOUNT # :
SEQUENCE # :	METER # :

Council Members