APPLICATION FOR SERVICE
An Equal Opportunity Provider
Transfer of service please complete sections 1 and 2 only. New meter installation complete sections 1, 2, and 3.
Please sign, date and return as soon as possible.

1. Name (Primary applicant)_____
                                                    FIRST   M.I.   LAST

    Name (Second applicant)_____
                                                    FIRST   M.I.   LAST

    Service
    Address_____   Subdivision_____

    _____   LOT #_____

    Home # (____)_____   Cell (____)_____   Email_____

    Drivers Lic. #_____   # persons residing_____   Date of Birth_____

    [   ] Owner of property   [   ] Renter/Lessee   [   ] Purchasing on Contract or Rent to Own

2.   INFORMATION FOR GOVERNMENT MONITORING PURPOSES
    The following information is requested by the Federal Government in order to monitor compliance with Federal
    laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to
    furnish this information, but are encouraged to do so. This information will not be used in evaluating your
    application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to
    note the race/national origin of individual applicants on the basis of visual observation or surname.

                    APPLICANT: [   ] I do not wish to furnish this information
    Ethnicity: [   ] White   [   ] NOT Hispanic or Latino   [   ] Black or
    Race/National Origin: [   ] American Indian or [   ] Asian   African American
    (Select one or more)   Alaska Native   [   ] Native Hawaiian or   [   ] Hispanic or Latino
                                  (not Alaskan)   or Other Pacific Islander
    Gender: [   ] Female   [   ] Male

3. <u>IF NEW METER INSTALLATION</u>:

    State Highway Permit (Required)   Yes [   ]   No [   ]

    Present Grade: Yes [   ] No [   ] (will you be changing the surface grade)

                    If No:_____inches above or below present grade
                                  (circle direction of change)
    (Once meter installation is complete, any alterations will be at member/customer expense)

    I agree to sign all necessary papers required by the water company and to abide by all rules and
    regulations of the company.

    Date_____   _____
                                                    member/customer signature

                                       _____
    Application taken by _____   member/customer signature