OFFICE USE ONLY
Receipt No
Account No

TOWN OF FARMLAND APPLICATION FOR WATER SERVICE

I hereby make application to the Town of Farmland	for water service and tender herewith the following sums.
Meter Deposit	\$125.00
Tap Connection Charge	\$500.00
Service Connection Charge	\$35.00
PROPERTY DETAILS FOR NEW SERVICE	
New Service Address	
APPLICANT DETAILS	
Name	Phone#
Postal Address	_ City, St., & Zip
Employer	_ Emp. Phone#
Does the applicant own the property? Yes	No
LEGAL OWNER OF PROPERTY IF DIFFERENT THAN T	HE APPLICANT
Owner Name	Phone #
Postal Address	City, St., & Zip
ADDITIONAL INFORMATION	
Will the applicant be residing at this address?	How many people will be residing at this residence?
Address of applicants last residence	
	ter services in your name in Farmland?
If Yes: What was the name and address	
Name and Phone# of Additional Contact	
I agree to pay the monthly water bill according to tarif and to comply with the rules and regulations of said Farm	fs filed with and approved by the Public Service Commission, nland Municipal Water Company.

I agree to use due care and to protect the property of the Farmland Water Utilities, not to allow any undue waste of water, to keep all water outlets closed and report to the water department any leaks which should develop in the system or any damage to the water meter. The Farmland Water Utilities shall have the right to enter my property at any time to make inspection, to repair service, or for reading the meter.

For any violation of this contract, violation of the Rules and Regulations of the Town of Farmland, or failure to pay any water bills when due; I will not hold the Town of Farmland responsible for turning the water off and agree to pay a minimum charge of \$35.00 for the re-establishment of water service.

SIGNATURE

DATE _____

TOWN OF FARMLAND

Pages 1 and 2 must be completed

METER DEPOSIT TRANSFER

Only meter deposits of \$125.00 can be transferred from one address to another

Original customer transfers a meter deposit to a new service address

I agree to transfer my meter deposit of \$125.00 *from* address ______. *to* address ______.

I understand that my current account must not have a balance to connect service at another address and I understand once my final bill is calculated I will pay the balance in full within 10 days or my water service will be disconnected at my new service address.

Date to disconnect service at the address you are moving from ______

Date to start service at the address you are moving to

Signature _____

CUSTOMER REQUEST TO CHANGE NAME

Date _____

If customer is deceased, this can only be a spouse

l,	, request the name on the Town of Farmland water bill be changed		
from	(original name on account) to	(updated name)	
due to original customer being ma	rried, divorced or deceased.		
Signature	Date		
	ADD A CO-APPLICANT		
	Co-applicant must also complete side 1		
l,	(<i>current customer</i>), request to add	(<i>co-</i>	
applicant) to account number	I understand by adding a co-applicant I will now be	e a co-owner of the	
meter deposit and both applicants	understand they will be equally responsible for the balance or	the account.	
Signature	Date		
OFFICE USE ONLY			
Original Receipt #			
Original Receipt Date			
Original Account #			