



WATER TRANSFER REQUEST

Date to Open NEW Account: _____
 Name: _____
 Social Security# (last 4 digits): _____ Driver's License or ID: _____ State: _____
 Date of Birth: _____ Home Phone: _____ Work Phone: _____
 Email: _____
 Mailing Address: _____

Spouse/Next of Kin: _____
 Home Phone: _____ Work Phone: _____
 Do you rent () or own () Landlord's Name: _____ Phone: _____

OLD Service Address: _____
 Date to Cutoff OLD Service: _____
 NEW Service Address: _____

A \$40 TRANSFER FEE WILL BE ADDED TO THE NEW ACCOUNT.

The old service can only be on for 7 days after the new service starts. We can only leave service turned on at both places for a maximum of 7 days.

I ACKNOWLEDGE THAT MY PRESENCE IS REQUIRED FOR CONNECTION OF SERVICE. IF CONNECTION OF SERVICE IS NOT POSSIBLE DUE TO RUNNING WATER, YOU MUST RESCHEDULE CONNECTION AND A \$25.00 SERVICE CALL FEE WILL APPLY. PLEASE COMPLETE ALL FIELDS POSSIBLE TO AVOID DELAYS IN WATER SERVICE ACTIVATION.

Do you wish your personal information to be confidential? Yes No
 Applicant Signature _____ Date _____
 I am at least 60 years of age and request the Late Penalty Exemption.

OFFICE USE ONLY

Deposit Amount/Receipt#:	Account#:	Input By:	Transfer Fee Applied
C/O Paid: Yes No	C/O Approved:	Lease or Proof of Ownership:	Sewer Transferred