EAST ALLEN WATER WORKS

4033 HWY. 26 OBERLIN, LA 70655 337-639-4956 FAX# 337-639-4957

APPLICATION FOR WATER SERVICE

DATE:			
NAME:	:PHONE #:		
SOCIAL SECURTITY #:	DATE OF BIRTH:		
MAILING ADDRESS:			
		ZIP CODE:	
SERVICE ADDRESS:			
CITY:	STATE:	ZIP CODE:	
DRIVER'S LIC.#:			
EMAIL ADDRESS:			
	·:		
DO YOU OWN OR RENT	AT THIS ADDRESS?	OWN RENT	
LAND LORD'S NAME IF R	ENT:		
ADDRESS:		PHONE#:	
		PHONE #:	
to pay the water system for wundersigned also understand for any water damage that m 10 th of every month and after not paid by the 20 th . A reconcection is \$50.00, the second	vater service on the premises in s that when the service is conn ay occur inside the residence d the 10 th there is a 10% late ch nection fee will be charged for econd time it is \$75.00 and the	KS to render service at the above address, and agrees in accordance with the applicable rates. The ected, EAST ALLEN WATER WORKS is not responsible lue to any outlets left open. Payments are due by the arge. Water service will be disconnected if amount is service to be reconnected. The first time for 3 rd time it is \$100.00. A connection fee of \$25.00 is moves within the water district and request a transfer.	
1. 2. 3. 4. I HEREBY APPLY FOR UTILITY ACCORDANCE WITH THE RAT	COPY OF DRIVER'S LICENSE RENTER'S AGREEMENT SIGN RENTER'S DEPOSIT OF \$100. FEE FOR CONNECTION OF \$2 SERVICE AT THE ABOVE ADDRES, RULES AND REGULATIONS		
Signature of applicant		Date	

Customers	of Fast	Allen	Water	Works

In an effort to enhance efficiency and provide better customer service, East Allen Water Works has "Radio Read Meters". Each meter will have a small radio transmitter that sends the current meter readings to the computer.

If a meter is damaged due to tampering, damage from running over it with vehicle/equipment or any other type of damage <u>the customer is responsible for the replacement cost</u>. The cost will be \$350.00.

Thank you for your corporation.				
East Allen Water Works				
Customer agrees to the above and will be responsible for any damage.				
Customer Signature:	Date:			

Customer: _____ METER #: _____ SERIAL #: PREVIOUS READINGS: _____ DATE OF CONNECTION: AMOUNT OF DEPOSIT: CHECK AMOUNT: _____ CHECK #: NAME ON CHECK: _____ CREDIT CARD AMOUNT: _____ APPROVAL CODE: _____ CASH AMOUNT: RECEIPT#: _____ DATE ENTERED INTO SYSTEM: _____

PREVIOUS CUSTOMER ACCT NAME & ACCT #: _____

OFFICE USE ONLY: