

BUSINESS

APPLICATION FOR WATER AND/OR SEWER SERVICE

BUSINESS NAME _____

ADDRESS _____

BILLING ADDRESS _____

PHONE # _____

CONTACT PERSON _____

ALTERNATE PHONE # _____

BUSINESS EIN # _____

BUILDING OWNER _____

OWNER'S ADDRESS _____

OWNER'S PHONE # _____

PROPERTY CLOSING DATE _____

BUSINESS SALE DATE _____

**I UNDERSTAND IF A NEW METER IS NECESSARY, PAYMENT
WILL BE RENDERED BEFORE WATER SERVICE IS TURNED ON**

THERE IS A \$10 TRANSFER FEE THAT IS NOT REFUNDABLE.

I HAVE READ THE INFORMATION SHEET PROVIDED.

SIGNATURE _____ **DATE** _____