

EMAIL APPLICATION WITH PROOF TO: WATER@WATAUGATX.ORG

ATTENTION PROPERTY OWNERS - PLEASE READ
BEFORE RENTERS WILL BE GRANTED WATER SERVICE IN THEIR NAME AN
INSPECTION OF THE PROPERTY MUST BE OBTAINED.

FOR MORE INFORMATION, CONTACT 817-514-5843 OR 817-514-5839.

OWNERS MUST SUBMIT proof of ownership/management papers &

RENTERS a copy of your lease agreement

All paperwork along with payment must be received before service will be established

NO EXCEPTIONS!

TYPE OF DEPOSIT: _____ OWN \$170.00 _____ RENT/LEASE: \$220.00

START DATE: _____ ACCOUNT# _____
(The earliest will be the following business day) (OFFICE USE)

SERVICE ADDRESS: _____

NAME: _____
PLEASE PRINT (Last) (First) (Middle)

MAILING: _____
(If Different Than Above) (Street) (City) (State / Zip)

ALL THE BELOW INFORMAION "MUST" BE COMPLETED FOR SERVICE

SOCIAL SECURITY NUMBER: _____ EMAIL: _____

DRIVERS LICENSE NUMBER & STATE: _____ DATE OF BIRTH: _____

EMPLOYMENT: _____ ARE YOU 65 YEARS OF AGE: YES _____ NO _____

WORK PHONE: _____ CELL/HOME: _____

MUST BE COMPLETED IF MORE THAN ONE NAME IS ON THE LEASE OR OWNERSHIP PAPERS

OTHER OCCUPANT: _____ DRIVERS LIC#: _____

SOCIAL SECURITY NUMBER: _____ DATE OF BIRTH: _____

CONTACT PERSON'S INFORMATION FOR PROPERTY PLACED IN A COMMERCIAL NAME

NAME: _____ TAX #: _____

WORK #: _____ HOME/CELL#: _____

RENTERS YOU MUST SUPPLY ALL LANDLORD INFORMATION

LANDLORD'S NAME: _____

ADDRESS: _____ PHONE: _____

IS THERE A TRASH CART/RECYCLE CART AT SERVICE ADDRESS? YES _____ NO _____ HOW MANY? _____

DO YOU WANT THE CITY TO WITHHOLD YOUR NAME/ADDRESS FROM PUBLIC INQUIRY? YES _____ NO _____

HAVE YOU HAD SERVICE WITH WATAUGA BEFORE? YES _____ NO _____, IF YES ADDRESS: _____

LIABILITY RELEASE: I, _____ (Renter or Owner of Property) hereby release the City of Watauga from all liability in the event damages are sustained to property or contents due to water damage which may be caused by leaking pipes, open faucets or broken pipes upon the City of Watauga turning on the water. I hereby apply for the utility service. This service includes water, sewer, sanitation, drainage and recycling. I agree to pay the monthly service charges as these bills come due. Any bills not paid by the due date will be subject to penalty charges and disconnect and/or termination.

IN ORDER FOR THE WATER TO BE TURNED ON BY THE CITY OF WATAUGA, SOMEONE "MUST" BE AT THE RESIDENCE! IF NO ONE IS AT THE RESIDENCE, METER WILL ONLY BE UNLOCKED AND RESIDENT WILL HAVE TO TURN METER ON.

DATE _____ SIGNATURE _____

CREDIT CARD # _____ EXP. DATE: _____ CVV _____ ZIP CODE _____

AMERICAN EXPRESS IS NOT ACCEPTED! THERE WILL BE A 3% PROCESSING FEE FOR CREDIT AND DEBIT PAYMENTS.

DO NOT EMAIL BACK WITHOUT CREDIT OR DEBIT CARD INFO