APPLICATION FOR WATER / SEWER / TRASH ACCOUNT

ID MUST BE VERIFIED IN PERSON, AS WELL AS RENTAL AGREEMENT, IF APPLICABLE

Service Activation Date: _____

Name on Account: First Name _____ Last Name _____

Physical Address: _____ Grottoes, VA 24441

Email address you would like your bill sent to: _____

Mailing Address *(If different than above)*: _____

Driver's License Number: _____ **Last 4 digits SSN:** _____

Date of Birth ____/____/____ **Phone:** _____

Do you rent or own? _____ **New Construction YES NO**

If you rent, from whom: _____ **Phone #** _____

Address _____ **Verified by**_____

Terms/ Conditions:

Deposit **- Cash/Check preferred. Cards accepted, 3% convenience fee applies. Your deposit will either be refunded or applied toward your last billing after notification of moving. A forwarding address is required to receive your deposit.** ***If you move, you are still responsible to pay for services rendered through your move date.***

• ***Bills*** **- Your water/sewer bill is mailed the 5th day of the odd months and due the 5th day of the even months. If your bill is not paid by the 6th a 10% penalty will be added to your balance. If you do not pay this bill by the required date, your services will be disconnected. If your services are disconnected there will be a $35.00 reconnection fee during business hours M-F 8:00 am – 4:30 pm. After hours and holidays there is a $70.00 reconnection fee. There is a $30.00 return check charge.** ***Failure to receive bill does not relieve your obligation to pay.*** **Online payments can be made at www.TownofGrottoes.com (Be sure to select UTILITY BILLS and enter your account number)**

• ***Trash Collection*** **- Trash services are included in your water/sewer bill if you reside in town limits. Trash will be collected in cans or dumpsters provided by the contractor for Town of Grottoes. Only bagged trash inside of the receptacle will be collected.** *National Holidays or inclement weather may affect the routine schedule. Please follow us on Facebook or the Calendar on the website for updates.* **YOUR PICKUP DAY:** _____

All of the information I have provided above is true and accurate. I understand that providing false information may leave me subject to criminal penalty. If you have previously lived in Grottoes and still have an unpaid utility balance, please be aware that it will need to be settled and may be added to your current account. I have read, understand, and agree to the terms and conditions listed above.

_____

Signature

_____

Date

BILLING SCHEDULE

Billing Period	1st Bill	Billed	Due
6/15 - 8/15	___	9/5	10/5
8/15 - 10/15	___	11/5	12/5
10/15 - 12/15	___	1/5	2/5
12/15 - 2/15	___	3/5	4/5
2/15 - 4/15	___	5/5	6/5
4/15 - 6/15	___	7/5	8/5

For Town Office Use Only:

ID verified? Yes No Initials: _____

Form of ID? Driv Lic Passport Other _____

Account number: _____

Deposit Amount: $150.00 *($75.00 limited svc)*

Payment: Cash Card Check #_____