



PWSD #12

304 N. Ranson Road
Greenwood MO 64034

Account #: _____

Water Service Application

Customer Name: _____
Print

Roommate/Spouse: _____

Service Address: _____

Please select one:

- Property Owner
- Lease to Purchase
- Rental

Landlord— Contract Holder: _____

Postal Address: _____

City: _____ State/Zip: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Cell Phone: _____

E-mail: _____

Emergency Contact: _____ Phone: _____

Date of Birth: _____ Social Security#: _____

Driver's License #: _____ State: _____

Primary Use of Water: *Please select one.*

- Domestic
- Non-domestic/Business
- Agricultural
- Apartment/Trailer Court

Terms:

- Applicant should be home when water service is established or restored. Applicant assumes all responsibility for any open outlets resulting in water loss or damage.
- Applicant contractually agrees to pay all water charges until applicant notifies the District and requests to terminate service to this residence.
- Applicant hereby agrees to abide by all Rules, Regulations and Policies established by District and any hereafter established, and further understands the District reserves the right to discontinue water service without notice for non-compliance. Applicant acknowledges receipt of the District's Customer Handbook. _____.
- The undersigned agrees that in the event any part of the water system constructed, expanded, modified or repaired after January 1, 1989 is found to contain materials that are not "lead free" the District shall have the right to remove the water meter and sever the service line at the above stated property. The definition of "lead free" as used herein shall be as defined in the Rules and Regulations of the Missouri Department of Natural Resources as it now exists or may be redefined.
- Applicant agrees to provide District Easement on above mentioned property for repair and/or construction of underground water utility in accordance with RSMo. 247.050.
- Applicant agrees to abide by Mo DNR 10 CSR 60—Backflow Prevention.

Signed: _____
Signature

Date: _____

OFFICE USE ONLY

Service Activation

In Service Date: _____ Beginning Reading: _____
Meter ID #: _____ Radio Read ID #: _____
Report Group: _____ Rate Codes: _____ Taxable: _____
Deposit: _____

Service Termination:

Out Service Date: _____ Final Reading: _____
Deposit Refund Check #: _____ Amount: _____
Forwarding Address: _____

Service Transfer:

New Service Address: _____
Account #: _____
Deposit Transfer: Y / N Date: _____ Amount: _____

Notes: