APPLICATION FOR WATER SERVICE *OWNER*

\$100.00 Meter Deposit Fee to Atlanta Utilities

EFFECTIVE DATE:		
APPLICANT:		
NAME:	SSN:	
EMPLOYER:	WORK PHONE:	
CO-APPLICANT / SPOU	SE:	
NAME:	SSN:	-
EMPLOYER:	WORK PHONE:	_
SERVICE ADDRESS:		_
MAILING ADDRESS: (if different than service)		-
HOME PHONE:	CELL PHONES:	
CONTACT IN EMERGENCY	PH:	
The above information, I have provided, is	s correct to the best of my knowledge.	
	I will be responsible to pay the delinquent amount with any incurred ding but not limited to any collection agency fees, and all court costs	
utility service agreement, I hereby waive r	bject of this agreement is situated outside the corporate limits of the my right to object and/or remonstrate against any future annexation rea requesting annexation to the town. This waiver shall be binding	proceedings instituted
	X CUSTOMER SIGNATURE DATE	E
FOR OFFICE USE ACCOUNT NUMBER:		
DATE OF DEPOSIT/ AMOU	UNT OF METER DEPOSIT \$ RECEIPT #	
REFUND: \$() APPLIEI	D:)	