

APPLICATION FOR WATER SERVICE

APPLICANT MUST APPLY IN PERSON AND HAVE A CURRENT
PICTURE / IDENTIFICATION AT THE TIME APPLYING.

NAME: _____

SPOUSE NAME: _____

PHYSICAL ADDRESS: _____

MAILING ADDRESS: (IF DIFFERENT) _____

DATE WATER REQUESTED : _____

DO YOU RENT _____ DO YOU OWN THIS HOUSE _____

DEPOSIT DATE : _____

AMOUNT OF DEPOSIT: _____

I HEREBY ACKNOWLEDGE THAT I HAVE RECEIVED A COPY OF THE
RULES AND REGULATIONS CONCERNING MY WATER SERVICE. I HAVE
READ AND UNDERSTAND THESE RULES.

(CUSTOMERS SIGNATURE & DATE)

CONTACT PHONE #: _____

AUTHORIZATION FOR PRE-AUTHORIZED PAYMENTS
(Ach Debits)

VERNON WATER & SEWER BOARD
VERNON, AL

Customer No.# _____ Account No.# _____

I (we) hereby authorize Vernon Water & Sewer Board, hereinafter called Company, to initiate debit entries for my (our) checking indicated below and the depository named below, hereinafter called Depository, to debit the same to such account. For my current water charges for the month. All debits will fall between the 5th and the 10th of each month.

DEPOSITORY NAME _____ BRANCH _____

CITY _____ STATE _____ ZIP _____

TRANSIT # _____ ACCOUNT # _____

This authority is to remain in full force and effect until Company has received written notification from me (or either of us) of its termination in such time and in such manner as to afford Company reasonable opportunity to act on it.

Customer Name _____

Amount _____ Begin Date _____

Signature _____

Please attach a voided check
