

City of Jersey Village

Residential Application for Water and Sewer Service

Service Address _____ Start Date ____/____/____

Name _____

Spouse's Name _____

Social Security # _____ Texas DL # _____

Home Phone # _____ Work Phone # _____

E-Mail Address: _____

Employer _____

Employer's Address _____

Deposit Amount **\$75.00** (Refunded when account is finalized)

Billing Address (if different than service address) _____

In accordance with House Bill No. 859, which was passed by the State Legislature and became effective September 1, 1993, our customer's have the right to request that we do not disclose certain confidential information. This personal confidential information consists of your address, telephone number, and social security number.

Please indicate in the appropriate blank your selection with the regard to disclosure of your personal information.

Yes, I would like my personal information to be kept confidential.

No, it is not necessary to keep my personal information confidential.

THE ABOVE PARTY IS RESPONSIBLE FOR PAYMENT OF ALL WATER BILLS AT THE ABOVE ADDRESS AND THEY WILL CONTACT THE CITY IN WRITING WHEN THEY ARE READY TO DISCONNECT SERVICE. WHEN THEY INFORM THE CITY TO DISCONNECT SERVICE THEY WILL GIVE THE CITY A FORWARDING ADDRESS AND PHONE NUMBER. THE DEPOSIT WILL THEN APPLY TO THE FINAL BILL, IF A REFUND IS DUE THE CITY WILL MAIL A CHECK TO THE FORWARDING ADDRESS. IF THERE IS A BALANCE REMAINING THE ABOVE PARTY WILL MAIL PAYMENT TO THE CITY BY THE 25TH OF THE NEXT MONTH.

All bills are due on the **25th of each month**, failure to receive bill does not waive penalty.

Date

Signature

FOR OFFICE USE ONLY

Receipt Number _____ Date _____ Initials _____

Account Number _____ Posted Date _____

PLEASE COMPLETE SERVICE AGREEMENT