

# DIAMOND CITY WATER & SEWAGE NEW ACCOUNT APPLICATION

## ACCOUNT HOLDER INFORMATION

DATE: \_\_\_\_\_ FULL NAME: \_\_\_\_\_  
(Name To Be On Account)  
BILLING ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_  
HOME PHONE: \_\_\_\_\_ WORK PHONE \_\_\_\_\_ CELL PHONE: \_\_\_\_\_  
DL#: \_\_\_\_\_ ST. \_\_\_\_\_ SS#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ MALE \_\_\_ FEMALE  
RACE: \_\_\_ AMERICAN INDIAN OR ALASKA NATIVE \_\_\_ ASIAN \_\_\_ AFRICAN AMERICAN \_\_\_ WHITE  
\_\_\_ HISPANIC OR LATINO \_\_\_ NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER \_\_\_ I DO NOT WISH TO FURNISH THIS INFO  
EMAIL ADDRESS \_\_\_\_\_ PREVIOUS WATER ACCOUNT \_\_\_\_\_  
(City & State)

## EMPLOYMENT

COMPANY/BUSINESS NAME \_\_\_\_\_ PH. NO. \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ST. \_\_\_\_\_ ZIP \_\_\_\_\_

## NAME OF SPOUSE/OTHER ADULT LIVING WITH YOU

FULL NAME: \_\_\_\_\_ WORK PHONE \_\_\_\_\_ CELL PH: \_\_\_\_\_  
DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ MALE \_\_\_ FEMALE RACE: \_\_\_\_\_

## EMERGENCY CONTACT INFORMATION

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ PH. NO. \_\_\_\_\_

## I AGREE TO THE CONDITIONS AS STATED IN ORDINANCES GOVERNING WATER, SEWER, AND SANITATION SERVICES.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## FOR OFFICE USE ONLY

ACCOUNT NO: \_\_\_\_\_ SERVICE ID NO: \_\_\_\_\_ SERVICE ADDRESS \_\_\_\_\_

<u>ACCOUNT TYPE</u>	<u>DEPOSIT</u>	<u>SERVICES</u>
OWNER	_____ \$100.00	WATER - RESIDENTIAL _____ COMMERCIAL _____ IND _____
RENT/LEASE	_____ \$200.00	SEWER - YES _____ NO _____
RENT/LEASE TO OWN	_____ \$200.00	SANITATION - 65 Ga. PC _____ 95 Ga. PC _____ SN# _____
BUILDING IN PROGRESS	_____ \$100.00	CONNECTION FEE - MASTER METER \$50.00 (NON-REFUNDABLE)

METER SERIAL #: \_\_\_\_\_ METER READING: \_\_\_\_\_ ROUTE#: \_\_\_\_\_ SEQUENCE#: \_\_\_\_\_

METER DEPOSIT RECEIPT#: \_\_\_\_\_ AMOUNT: \$ \_\_\_\_\_ CHECK#: \_\_\_\_\_ CASH: \_\_\_\_\_

CONNECTION RECEIPT# \_\_\_\_\_ AMOUNT: \$ \_\_\_\_\_ CHECK#: \_\_\_\_\_ CASH: \_\_\_\_\_

LANDLORD: \_\_\_\_\_ PHONE: \_\_\_\_\_

NOTES: \_\_\_\_\_ CONNECTION WO# \_\_\_\_\_

\_\_\_\_\_ I GIVE MY PERMISSION TO THE DIAMOND CITY WATER DEPARTMENT TO GIVE MY NAME, ADDRESS, AND PHONE NUMBER TO THE DIAMOND CITY WELCOME WAGON.

\_\_\_\_\_ MY EMAIL ADDRESS, HOME PHONE NUMBER, AND MY CELL PHONE NUMBER MAY BE GIVEN TO NATCO TO INCLUDE IN DIAMOND CITY'S EMERGENCY ALERT SYSTEM.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE