

ROCKWOOD WATER, SEWER & NATURAL GAS

WO# _____ (Office Use)

APPLICATION FOR SERVICES: WATER____SEWER____GAS____GARBAGE____

APPLICATION DATE _____ DATE SERVICE REQUESTED _____

NAME: _____ HOME PHONE _____
Last First Maiden or MI

CELL PHONE _____

STREET ADDRESS: _____ CITY _____

BILLING ADDRESS: _____ CITY _____ ST _____ ZIP _____

CHECK ONE:

OWN _____ (proof of ownership- REQUIRED)

RENT _____ (renter receipt- REQUIRED)- LANDLORD: _____

DL# _____ STATE _____ SS# _____ DOB _____

PLACE OF EMPLOYMENT _____ WORK PHONE _____

PREVIOUS ADDRESS: _____ CITY _____ ST _____ ZIP _____

SPOUSE/NEAREST RELATIVE: _____ PHONE# _____

STREET ADDRESS: _____ CITY _____ ST _____ ZIP _____

CUSTOMER SIGNATURE _____ DATE _____

The applicant whose signature appears above agrees to pay for service as bills are rendered in accordance with the rates, rules, and regulations adopted and in effect at the time of delivery of service. Any Delinquent accounts will be disconnected until payment is current and reconnect fees are paid. All legal and/or court expenses incurred due to collection of delinquent accounts will be charged to the customer.

SERVICE FEE PAID _____ CONNECTION FEE PAID _____ TAP FEES PAID _____ DEPOSIT _____

RW&G REPRESENTATIVE _____ DATE _____

Required documentation for services:

Proof of Ownership documentation or Renter receipt and Driver license.

All deposits and fees must be paid prior to services being turned on.

Deposit amounts are based on a Credit Check (\$0, \$150. \$300)