

SERVICE APPLICATION  
TOWN OF MOREHEAD WATER DEPARTMENT  
(PLEASE PRINT)

Last Name/Company Name \_\_\_\_\_

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Social Security # or FIN/SIN (Businesses only) \_\_\_\_\_ Drivers License # \_\_\_\_\_

Service Address \_\_\_\_\_

(Circle one)    Residential    Business

Mailing Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Employer \_\_\_\_\_

Service Start Date \_\_\_\_\_

I hereby apply for water/sewer/solid waste service and agree to abide by the conditions at the bottom of this application.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

I hereby make application for water, sewer and solid waste (utility) service to be supplied at the address described and hereby agree to pay for this service in accordance with the rates of the Town of Morehead Utility Policy which are now or later may be filed with the proper Regulatory Authorities. It is also understood and agreed that the Town will require from me as security for payment for utility service a cash deposit and a nonrefundable service fee of such amount as it may deem needed for its protection unless otherwise restricted. The cash deposit to be based on estimated monthly consumption and the Town reserves the right to require at its option an increase of such cash deposit in the event that my monthly consumption exceeds the estimated amount. Such cash deposit will be applied toward any balance owing the Town for service with any remainder to be refunded to me. The Town reserves the right to discontinue service without further notice in the event that payment for service has not been received within ten days from the date of the bill for such service. In the event service is discontinued for non-payment of the bill, service shall not thereafter be furnished said premises until all payments due and the reconnection fee as provided in the Town's rate schedule is paid. I agree to pay attorney and collection costs in the event of default. **Per Town ordinance customer requests for disconnection/closure of utility service account must be submitted in writing. Failure to do so will not relieve the customer of any charges on the account.**

For Office Use Only

Route/Seq \_\_\_\_\_ Work Order # \_\_\_\_\_ CSR \_\_\_\_\_

Privilege License (circle one)    Obtained    Needed