

**CITY OF MOUNT AIRY
APPLICATION FOR
WATER AND SEWER SERVICE**

**PO Box 1725
Mount Airy, NC 27030
Voice: (336) 786-3517
Fax: (336) 719-7565
E-mail: utilities@mountairy.org**

PLEASE PRINT INFORMATION

Jurisdiction: City of Mount Airy Flat Rock/Bannertown

Has this location had water and sewer service before? No Yes
(If no, an "Application for New Water and Sewer Connection" must also be filled out.)

First Name: _____ Mid Init: _____ Last Name: _____

Service Address: _____

Location of Property: Inside City Limits or Outside City Limits

Billing Address: _____

Date of Birth: _____, _____

Social Security Number: _____

Telephone No.: Home _____ Work _____

Place of Employment: _____

Do you own or rent this property? Own or Rent

If renting, landlord's name: _____

Date Requested for Service Initiation: _____

*****NOTICE TO ALL CUSTOMERS*****

The City of Mount Airy welcomes you as a customer. In order to provide you the best possible service, we ask that you review the following rules and regulations regarding our services.

An application fee of \$15.00 and a connection fee of \$25.00 is due with completed application.

Although disclosure by the applicant is voluntary, we request a social security number. This will be used for identification, credit, and collection purposes.

When applying for water or sewer service, the applicant must show an approved government issued picture ID in order for the application to be accepted. A photo copy of the ID will be taken and kept with the application.

By signing this application the customer authorizes the City of Mount Airy to search various databases, including credit reports, for purposes of identity verification and credit extension.

Payments not received by 4:30 pm 9 days after the due date are subject to a 5% late payment penalty, with a minimum penalty of one dollar 1.00 (the due date is currently ten days after the bill date).

If payment is not received by 4:30 pm 23 days after your bill date, a \$25.00 fee will be added to your account and your water service will be scheduled for disconnection.

The City imposes a \$25.00 service charge on all returned checks and drafts. Accounts that are paid by check or draft with insufficient funds are considered unpaid until the full amount due, including return service charge, is paid.

I have read the above notice and agree to abide by its terms and conditions.

Signed: _____ Date: _____

*****If you would like for the City to draft your checking or savings account to pay the monthly bill, please include a voided check and complete the "Customer Draft Authorization Form".*****