

CITY OF DIAMOND CITY, ARKANSAS
WATER & SEWER NEW ACCOUNT APPLICATION

ACCOUNT HOLDER INFORMATION

DATE: _____ FULL NAME: _____
(NAME THAT APPEARS ON DRIVERS LICENSE)

PHYSICAL ADDRESS: _____ CITY _____ ST _____ ZIP _____

BILLING ADDRESS: _____ CITY _____ ST _____ ZIP _____

HOME PHONE: _____ WORK PHONE: _____ CELL PHONE: _____

OWNER _____ RENTER _____ DL# _____ STATE _____ EXP _____ DOB _____ MALE _____ FEMALE _____

EMAIL ADDRESS: _____ PREVIOUS WATER ACCOUNT _____
(CITY, STATE & ZIPCODE)

EMPLOYMENT

COMPANY/BUSINESS NAME _____ PHONE # _____

ADDRESS _____ CITY _____ ST _____ ZIP _____

NAME OF SPOUSE/OTHER ADULT LIVING WITH YOU

FULL NAME: _____ WORK PHONE _____ CELL PHONE _____

DL# _____ STATE _____ EXP _____ DOB _____ SS# _____ MALE _____ FEMALE _____

EMERGENCY CONTACT INFORMATION

NAME: _____ RELATIONSHIP: _____ PHONE NUMBER _____

PET LICENSE

PETS? YES/NO HOW MANY? _____ DOGS _____ CATS _____ NEUTERED/SPAYED: YES/NO
AMOUNTS LISTED BELOW ARE FOR 1 YEAR, DUE AT THE TIME OF APPLICATION
UP TO DATE ON SHOTS? _____ FEES- \$10.00 IF NOT SPAYED/NEUTERED \$7.00 IF SPAYED/NEUTERED

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

SIGNATURE: _____ DATE: _____

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FOR OFFICE USE ONLY

ACCOUNT NO: _____ SERVICE ADDRESS: _____

<u>ACCOUNT TYPE</u>	<u>DEPOSIT</u>	<u>SERVICES</u>
OWNER	___\$200	WATER- _____ RESIDENTIAL _____ COMMERCIAL _____ INDUSTRIAL
RENTER	___\$200	SEWER- _____ YES _____ NO

CONNECTION FEE: _____ \$50 (NON-REFUNDABLE)	SANITATION- _____ 65GAL _____ 95GAL _____
	METER SERIAL # _____ METER READING _____

METER DEPOSIT RECEIPT# _____ AMOUNT \$ _____ CHECK# _____ CASH _____

CONNECTION FEE RECEIPT# _____ AMOUNT \$ _____ CHECK# _____ CASH _____

PET LICENSE FEE RECEIPT# _____ AMOUNT \$ _____ CHECK# _____ CASH _____

LANDLORD _____ PHONE: _____

NOTES: _____

LONGITUDE _____ LATITUDE _____

PREPARED BY: _____ DATE: _____