CVS CONCORD COMMUNITY WATER SYSTEM

P.O. BOX 267 BOSTIC, NORTH CAROLINA 28018 828-245-9397

> concordcws@gmail.com WWW.CONCORDCWS.COM

APPLICANT NAME:	
SERVICE ADDRESS:	
MAILING ADDRESS:	
CITY, STATE, ZIP:	
TELEPHONE PRIMARY # ()	ALTERNATE # ()
	_() EMAIL
SPOUSE'S NAME	SPOUSE'S PHONE
IF RENTAL, PROVIDE	ASE OR PROOF OF RENTAL MUST BE PROVIDED)
LANDLOR	RD PHONE
REQUESTED DATE TO START SERVI	СЕ

Applicant(s) hereby requests service at the location shown below, declares that he(she) is not indebted to the Water System for any prior service, and agrees to promptly pay any and all bills for water services provided by the Water System.

For New Construction - Applicant(s) agrees to provide location on the premises where the water meter can be located which will make it accessible at all reasonable times for the purpose of connecting or suspending service, reading meter, testing or inspecting meter, or any other purpose which is proper and necessary in the conduct of the utility's business.

If applicant(s) is not to be the occupant of the property, applicant agrees to notify the Water System when and to whom any transfer of ownership is made. Applicant also agrees to inform Water System if any multiple dwellings are added to their water service. (Mobile Homes, Businesses, etc.)

After the tap is installed the applicant agrees to pay for any and all modifications to the service line or meter box due to the removal or addition of topsoil or any other material.

Applicant swears or affirms that all information on this application is accurate, true, and complete.

(APPLICANT SIGNATURE)

(CO-APPLICANT SIGNATURE)

DATE