

# The Water Works and Sewer Board of the City of Eufaula, AL Application for Service

NAME

SPOUSE'S NAME

SS#

HOME/CELL TELEPHONE #

DRIVERS LICENSE #

EMAIL ADDRESS

ENROLL ME IN ELECTRONIC STATEMENTS (PLEASE INITIAL)

DATE OF BIRTH

NAME OF NEAREST RELATIVE NOT LIVING WITH YOU

ADDRESS & PHONE # OF ABOVE RELATIVE

NEW SERVICE ADDRESS

RENT OR OWN

IF RENT, OWNER'S NAME

YOUR PLACE OF EMPLOYMENT

WORK TELEPHONE #

ADDRESS OF EMPLOYER

YOUR MAILING ADDRESS (IF DIFFERENT FROM SERVICE ADDRESS)

IS THIS A NEW TAP? IF SO, INDICATE THE METER SIZE

YOUR PREVIOUS ADDRESS

SIGNATURE

DATE

***By signing this application, you are in agreement that any outstanding balance incurred in your name may be transferred to this account.***