

Water & Sewer Department

Application for Utility Service

Residential

SERVICE ADDRESS

ADDRESS: ______

IF RENTAL, ATTACH LEASE AND LANDLORD CONTACT INFORMATION

APPLICANT

NAME:		DATE OF BIRTH:	
		DRIVER LICENSE # / ST:	
MAILING ADDRESS:			
CITY:	STATE:	ZIP:	
PRIMARY PHONE:		ZIP: EMAIL:	
CO-APPLICANT			
NAME:		DATE OF BIRTH:	
		DRIVER LICENSE # / ST:	
		EMAIL:	
EMERGENCY CONTACT			
NAME:		PHONE NUMBER:	

Page 1 of 2 Initial _____

CONDITIONS OF SERVICE

- 1. Applicant will comply with the rules and regulations of the Japer Water & Sewer Department and by signature below will acknowledge this compliance.
- 2. Disclosure of falsified application will result in disconnection of service.
- 3. Jasper Water & Sewer or its third-party collectors will have the right to contact the customer's employer for the purpose of collecting unpaid bills. The customer will pay all expenses including reasonable attorney's fees associated with the collection of utility bills.
- 4. The customer will not be allowed to obtain utility service unless all delinquent accounts are brought current.
- 5. The customer must terminate service by notifying the Jasper Water & Sewer in person and sign a disconnection form.
- 6. No persons other than the person(s) listed on the application will be allowed to make arrangements for reconnection or termination of services.
- I understand that payment is due in full by the 15th of each month, failure to pay by the 25th will result in disconnection of services and a reconnection fee be assessed to reconnect.
- 8. I understand that failure to make payment will result in the account being turned over for collections.
- 9. I agree to pay interest and all cost of collection including reasonable attorney fees.

l,	, have read and understand the terms of
service and hereby apply for services from the Jasper	Water & Sewer Department. I agree to
pay for all services rendered until I terminate services	. All information in this application is true
and correct to the best of my knowledge.	

SIGNED: ______ _____

FOR OFFICE USE ONLY

ACCOUNT NUMBER: ______ CONNECTION DATE: ______
CONNECTION FEE: _______
CONNECTION FEE: _______
WATER & SEWER ADMINISTRATOR
DATE
JASPER WATER & SEWER – 32 COURTHOUSE SQ – JASPER, TN, 37347 – (423) 942-3180

Page 1 of 2 Initial



Water & Sewer Department

Application for Utility Service

Business

SERVICE ADDRESS

ADDRESS: ______

IF RENTAL, LANDLORD CONTACT INFORMATION: _____

APPLICANT

NAME OF BUSINESS:				
IAX ID #	SUCIAL SECURITY #			
MAILING ADDRESS:				
CITY:	STATE:	ZIP:		
PRIMARY PHONE:		EMAIL:		
BUSINESS OFFICERS				
NAME:		POSITION:		
		POSITION:		
		POSITION:		
		POSITION:		
EMERGENCY CONTACT				
NAME:		PHONE NUMBER:		
CONDITIONS OF SERVICE				
•••••••	•	ind regulations of the Japer Water & Sev	wer	

- Department and by signature below will acknowledge this compliance.
- 2. Disclosure of falsified application will result in disconnection of service.

Page 1 of 2 Initial _____

- 3. Jasper Water & Sewer or its third-party collectors will have the right to contact the customer's employer for the purpose of collecting unpaid bills. The customer will pay all expenses including reasonable attorney's fees associated with the collection of utility bills.
- 4. The customer will not be allowed to obtain utility service unless all delinquent accounts are brought current.
- 5. The customer must terminate service by notifying the Jasper Water & Sewer in person and sign a disconnection form.
- 6. No persons other than the person(s) listed on the application will be allowed to make arrangements for reconnection or termination of services.
- I understand that payment is due in full by the 15th of each month, failure to pay by the 25th will result in disconnection of services and a reconnection fee be assessed to reconnect.
- 8. I understand that failure to make payment will result in the account being turned over for collections.
- 9. I agree to pay interest and all cost of collection including reasonable attorney fees.

I, ______, have read and understand the terms of service and hereby apply for services from the Jasper Water & Sewer Department. I agree to pay for all services rendered until I terminate services. All information in this application is true and correct to the best of my knowledge.

SIGNED: ______

FOR OFFICE USE ONLY

ACCOUNT NUMBER: _____ CONNECTION DATE: _____

CONNECTION FEE: _____

WATER & SEWER ADMINISTRATOR

DATE

JASPER WATER & SEWER – 32 COURTHOUSE SQ – JASPER, TN, 37347 – (423) 942-3180

Page 1 of 2 Initial _____