

GLENPOOL CONTRACT FOR WATER SERVICE

Today's Date _____ Circle One: Buying Renting Own Landlord

Date Service is to Begin: _____

Name of Responsible Party: _____

Service Address: _____

Mailing/Transfer Address, if Different: _____

e-mail Address: _____

Home Ph#: _____ Cell Ph#: _____

Driver's License#: _____ SSN: _____ DOB: _____

Employer: _____ Work Ph#: _____

Co-Occupant/Spouse: _____ Relationship: _____

Employer: _____ Work Ph#: _____

Driver's License#: _____ SSN: _____ DOB: _____

Personal Reference: _____ Phone#: _____

Name of Property Owner: _____

Address: _____ Phone#: _____

**The undersigned agrees to pay the established rates set forth by the Glenpool Utility Service Authority Ordinances and agrees to regulations governing said services.
This application becomes contract upon the establishment of service.**

APPLICANT'S SIGNATURE: _____

FOR OFFICE USE ONLY

Account #: _____ Receipt #: _____

Deposit Amount: \$ _____ Connect or Transfer Amount: \$ _____

Turn On or Read and Leave On

Time: 10:30 – 12 or 2:30 – 4pm