

## TOWN OF ERVING WATER DEPARTMENT

**Application for New Water Service** 

Owners' Name	
Current Address	
Date of Application	
New Service to Be Installed At	
Number of Families	Date Billed
Service Size	Date Paid
Meter Size	Meter Install Date

The above is a true statement of all intended uses of water.

It is understood that all service installation charges must be paid in full before the water is supplied for use.

I hereby agree to conform to the rules, rates, and regulations of the Town of Erving Water Department now in force or may hereafter be adopted by the Board of Water Commissioners.

Contractor's Name	
Address	Phone
Signature of Owner	Date
Application Approved By	Date
Date to Be Installed	Date
FOR OFF	TICE USE ONLY
Service No	Route No
ERVING WA	ATER DEPARTMENT