



New Water/Sewer Department Application

This form must be completed before water/sewer service can be connected
 Effective November 10, 2005, water service will ONLY be connected in the name of the property owner

\$100.00 Deposit Required

Deposits will only be refunded to Owner.

Social Security Number disclosure is voluntary. Extra Deposit required if not provided.

Date			
Owner Name			
Social Security #			
Renter Name (If Applicable)			
Mailing Address			
Service Address			
Home Phone #:		Cell Phone #:	
E-Mail Address:			
Emergency Contact Name:		Relationship:	
Contact #:			

I have read and know I have access to the Town Water Policy either online or by written summary.

I attest that the above is correct to the best of my knowledge and that I am responsible for all charges and bills associated with this account. I agree to comply with the Town of Robbins Rules and Regulations for Municipal Services.

Owner's Signature: _____

For Office Use Only			
Account #		Location #	
Deposit Amount:			