

# TRANSFER SERVICE

The transfer service request may only be used for customers with an existing Utility account, provided that the new service address is also operated by this Utility. Please download, complete, and submit this form to our Customer Service office via email, fax, or mail.

*Required fields are marked with an asterisk (\*).*

## Applicant Information (All Applicants Must include copy of Driver's License and Sign this Form)

Account Number: \* (e.g. 1234567890) \_\_\_\_\_

Applicant Name: \* \_\_\_\_\_

Mailing Address: \* \_\_\_\_\_

City: \* \_\_\_\_\_ State: \* \_\_\_\_\_ Zip Code: \* \_\_\_\_\_

Last four digits of Social Security Number or Federal Tax ID: \* \_\_\_\_\_

Home Phone: \* \_\_\_\_\_ Cell Phone (if Primary phone number\*): \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name of additional person authorized to make changes to this account: \_\_\_\_\_

Email Address: \_\_\_\_\_ Social Security Number or Federal Tax ID: \* \_\_\_\_\_

Home Phone: \* \_\_\_\_\_ Cell Phone (if Primary phone number\*): \_\_\_\_\_

## Address where we will be transferring service from

Street Address: \* \_\_\_\_\_

City: \* \_\_\_\_\_ State: \* \_\_\_\_\_ Zip Code: \* \_\_\_\_\_

Move Out Date: \* *Note: The Utility requires 48 hours' notice in order to schedule meter reads. The service date must not fall on a weekend and must not be more than 90 days in the future.*

\_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year

## Address where we will be transferring service to

Street Address: \* \_\_\_\_\_

City: \* \_\_\_\_\_ State: \* \_\_\_\_\_ Zip Code: \* \_\_\_\_\_

Move-In Date: \* *Note: The Utility requires 48 hours' notice in order to schedule meter reads. The service date must not fall on a weekend and must not be more than 90 days in the future.*

\_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year

## Requested Services\*

*Note: At least one service must be checked. Some regions require a supplemental grinder pump agreement.*

- |   |   |
|---|---|
| <input type="checkbox"/> Water at an existing location      | <input type="checkbox"/> Wastewater at an existing location with grinder pump |
| <input type="checkbox"/> Wastewater at an existing location | <input type="checkbox"/> Temporary service – fire hydrant meter               |

## Additional Information

Customer Type: \*  Residential  Commercial Are you the Owner or Tenant?  Owner  Tenant

Do you have any special service needs?  Pool  Fire sprinkler  Irrigation  Other

I acknowledge by submitting this agreement that upon accepting service I will be subject to the terms and conditions of retail water and/or wastewater service as contained in the Tariff Rate Schedule. I further acknowledge and agree that the terms and conditions of retail water and/or wastewater service contained in the Tariff Rate Schedule shall constitute a contract between The Utility and me and may be enforced as such.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date