

APPLICATION FOR TRANSFER OF WATER SERVICE

Application Fee of \$100

DATE: _____**NAME OF NEW ACCOUNT HOLDER:** _____**MAILING ADDRESS:** _____
_____**PHONE:** _____ **EMAIL:** _____**TYPE OF USE**

- ____ RESIDENTIAL
____ NON-RESIDENTIAL OR MULTI-FAMILY UNIT
____ YEAR-ROUND OCCUPANCY
____ SEASONAL OCCUPANCY
____ SUMMER SEASON ONLY - Do you plan to close & winterize your home each year? Y / N
____ WINTER SEASON ONLY

PREVIOUS ACCOUNT INFORMATION**PROPERTY ADDRESS:** _____**NAME OF PREVIOUS ACCOUNT HOLDER:** _____**ANTICIPATED DATE OF PROPERTY TRANSFER:** _____

NAME OF PLUMBER (IF KNOWN): _____

PLUMBER PHONE NUMBER AND EMAIL: _____

NAME OF PROPERTY MANAGER (IF APPLICABLE): _____

PROPERTY MANAGER PHONE AND EMAIL: _____

FOR WATER DEPARTMENT USE ONLY:

____ ACCOUNT NUMBER _____

____ FINAL READ REQUESTED _____

____ PROPERTY TRANSFER COMPLETED _____

NOTES: _____
