



Application for Wastewater Services

Application Date: _____

Name: _____

Mailing Address:

Service Address:

Home Phone: _____ Work Phone: _____ Cell: _____

Social Security #: _____ Driver License #: _____

Residence: **Circle One:** Own or Rent/Lease

Name of Landlord: _____

Commercial Only: Business Name: _____

Circle One: Own or Rent/Lease Name of Landlord: _____

Fees: Connection Fees: \$ _____ Tap Fees: \$ _____

The applicant agrees to the following conditions:

1. Application will be completed and required fees paid before service is installed.
2. Each residence or business location will have separate wastewater service.
3. All payment of bills will be required as per the Town of Vonore billing and collections schedule or the service will be subject to collection procedures up to and including termination of services.
4. If service is terminated for nonpayment, all billing and applicable fees will be paid in full before service is restored.
5. Rates for wastewater service are available at Vonore City Hall and are subject to change at any time upon the proper approval of the governing board.
6. Employees of the town reserve the right to come onto private property to check, repair, or maintain the service.
7. Any false information given on this application may result in the immediate termination of services.

Signature: _____ Date: _____