



# CALVERT CITY MUNICIPAL WATER & SEWER COMMERCIAL INDUSTRIAL SERVICE REQUEST

Company Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail Address \_\_\_\_\_

Service Address: \_\_\_\_\_

Banking Institution: \_\_\_\_\_

Corporation: \_\_\_\_\_ Sole Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_ Other \_\_\_\_\_

Sole Partnership Owner(s) Name: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Accounts Payable Contact: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Local Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Local Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Has your company ever had water with Calvert City before? \_\_\_\_\_ Yes \_\_\_\_\_ No

Has anyone in your household ever had water with Calvert City before? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, under what name? \_\_\_\_\_

Is this rental property? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, Property Owner: Name \_\_\_\_\_

Property Owner Address \_\_\_\_\_

Property Owner Phone Number \_\_\_\_\_

Paid Meter Deposit (\$150) \_\_\_\_\_ Yes \_\_\_\_\_ No

Paid Tap on Fee (\$ \_\_\_\_\_) \_\_\_\_\_ Yes \_\_\_\_\_ No

Services to be provided: \_\_\_\_\_ Water \_\_\_\_\_ Sewer \_\_\_\_\_ Garbage

Would you like to sign up for automatic withdrawal? Yes \_\_\_\_\_ No \_\_\_\_\_

I have been given a copy of the Calvert City Water and Sewer rules and regulations. I have read and understand these rules, regulations and charges as they apply to my account. My signature below confirms all information given above is truthful and correct.

Customer Signature \_\_\_\_\_ Date \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_

OFFICE USE ONLY-----

Account Number \_\_\_\_\_