



215 Halbert
Richwood, TX 77531
979-265-2082
979-265-7345

APPLICATION FOR WATER SERVICE

DATE OF APPLICATION: _____

APPLICANTS NAME _____

DATE OF BIRTH: _____

NAME AS YOU WISH IT TO APPEAR ON BILL: _____

SOCIAL SECURITY NUMBER _____

TEXAS DL NUMBER _____

CO-APPLICANTS NAME _____

DATE OF BIRTH: _____

SOCIAL SECURITY NUMBER _____

TEXAS DL NUMBER _____

NEW ADDRESS _____

NEW PHONE # _____

MAILING ADDRESS: _____

FORMER ADDRESS _____

FORMER PHONE # _____

APPLICANT PLACE OF EMPLOYMENT: _____

JOB TITLE: _____

WORK PHONE # _____

CO-APPLICANT PLACE OF EMPLOYMENT: _____

JOB TITLE: _____

WORK PHONE # _____

NAME AND ADDRESS OF NEAREST RELATIVE OR CONTACT:

NAME AND ADDRESS OF SPOUSE OR OTHER ADULT IN HOUSEHOLD:

I, the undersigned, do hereby apply for utility services provided by the City of Richwood. I understand that my deposit will be held until service has been discontinued and will be applied to the outstanding balance. I also understand that I will be legally liable for all debts incurred by receiving the services of the City of Richwood. I understand that should I or any other adult residing at my address have a delinquent account with any past utility provider, the delinquency may be added to my current bill and a \$25.00 collection bill will be assessed.

SIGNATURE: _____

FOR OFFICE USE ONLY	
Work Order # _____	Meter Reading _____
Receipt # _____	Account # _____