

APPLICATION FOR SERVICES
City of Statham

(PLEASE PRINT)

NAME: _____

CHECK ONE: _____ RENT (300.00)Deposit _____ OWN (150.00)Deposit _____ BUSINESS(500.00)Deposit _____
Commercial & Industrial

PHONE NUMBER _____ CELL PHONE NUMBER _____

SOCIAL SECURITY OR FEDERAL TAX ID#: _____

PROPERTY ADDRESS: _____

BILLING ADDRESS: _____

EMPLOYER NAME: _____ BUSINESS #: _____

EMPLOYER ADDRESS: _____ CITY: _____

TYPE OF SERVICE REQUESTED: _____ WATER _____ SEWAGE

SERVICE START DATE: _____

SIGNATURE OF APPLICANT: _____

Date: _____

Emai: _____

"The following is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in the program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to make the race/national origin of individual applicants on the basis of visual observation or surname."

- | | | |
|--|--|---------------|
| 1___ White, not of Hispanic origin | 4___ Hispanic | 7___ Male |
| 2___ Black, not of Hispanic origin | 5___ Asian | 8___ Female |
| 3___ American Indian or Alaskan native | 6___ Native Hawaiian or Pacific Islander | 9___ Business |

"This is an Equal Opportunity Program. Discrimination is prohibited by Federal Law. Complaints of discrimination may be filed with the Secretary of Agriculture, Washington, D.C. 20250."

----- OFFICE USE ONLY -----

Account # _____ Service: _____ Residential _____ Business _____ Other _____

Amount of Deposit: _____ Date Paid: _____ Cash _____ Check _____ C. Card _____

IDENTIFICATION: _____ DOB: _____

PREVIOUS SERVICE WITH CITY OF STATHAM: _____ YES _____ NO

Payments are due on the **15th** of each month by 5pm unless otherwise noted on the utility bill. If the 15th falls on a Saturday, Sunday or Holiday, the due date is extended to the following business day.

A Penalty in the amount of **10%** of the account balance will be assessed the business day following the due date.

Accounts with an unpaid balance after 5:00 pm on the **20th** day of the month are subject to disconnection without prior notification and an Admin Fee of \$50.00 will be placed on the account. If water is disconnected for non-payment, service will be reconnected within 24 hours upon FULL payment of ALL past due balances PLUS the cutoff fee at City Hall.

If payment is returned due to insufficient funds/closed account, we will attempt to contact you at the phone number listed on your account. Please check to make sure we have a current phone number on file.

If the account has two payments that are returned for insufficient funds, the account will be placed on a cash only basis. Once the account has remained in good standing for one year, the City of Statham, will change the account to accept all forms of payment.

Any damage to the meter or components will result in charge(s) added to the account.

By signing below I acknowledge that I have read the above policies and I have received a copy of the utility rates.

Signature

Date