Corporation of Shepherdstown 104 N. King Street P.O. Box 248 Shepherdstown, WV 25443

## **UTILITY USE ONLY**

Deposit Fee:
Check no.:
Money order no.:
Cash:

Date:

## New Customer Application for Water and/or Sewer Service

1.		Date of occupancy:	
2.	Customer's name:	Ph.:	
	Names of other occupant(s) living in household:		
	Physical Address (Please include Apt. or Lot	# if applicable):	
	Mailing Address (Where your bill will be ser	t):	
3.	Customer's Driver's License No.:		
	Social Security No.:		
	Place of Employment:		
	Phone No.:		
	Place of Employment Address:		
4.	Are you the owner? □Yes □No (If No, Please *required*)	provide landlord's information below	
	Landlord's Name:	Ph	
	Mailing Address:		
5.	Have you had service with us before? □Yes below)	□No (If Yes, Please provide information	
	Address where service was provided:		
	Name account was listed under:		
	Date you moved in/out:		

6. Application for: □Water □Water and Sewer □Water, Sewer, Garbage							
Type of use: □Residential □Industrial □Commercial							
If Application is for Residential service, please answer the following:							
Number of persons in household:							
Number of bathrooms:							
Please Read Carefully							
A copy of your Driver's License, Lease Agreement, and Security Deposit must be submitted to							
the Water Department before your Application can be processed. We require 48 hour notice prior to turning water on or off.  Method of Payment  The Corporation of Shepherdstown accepts check, cash, and money order for all payments.							
				Multiple checks are not accepted.			
				Please initial that you have read and understand our Method of Payment Policy:			
hereby state that the above information, to the best of my knowledge, is true and correct.							
Signature Date							