

**TOWN OF MOSHEIM UTILITY DISTRICT**

1000 MAIN STREET

MOSHEIM, TN 37818

OFFICE: 423-422-4051 EMAIL: townhall1@earthlink.net

It is the policy of the Utility to require the applicant seeking service be the responsible party residing at the service address. I agree that the meter will remain accessible to the Water Dept. employees at all times. The meter cannot be obstructed or fenced in without providing a gate for accessibility. **ALL SERVICES REQUIRED TO HAVE A PRESSURE REDUCER.**

**THIS AGREEMENT**, entered into by and between Town of Mosheim Utility, a Utility established and existing under the laws of the State of Tennessee, hereinafter referred to as the "Utility" and the Applicant, hereinafter referred to as the "Customer".

**CUSTOMER ACCOUNT NUMBER#** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**NEW ON:** \_\_\_\_\_ **CHANGE ADDRESS:** \_\_\_\_\_ **BILL & PULL:** \_\_\_\_\_

**Cut-on Date:** \_\_\_\_\_ **Cut-off Date:** \_\_\_\_\_ **Meter Reading:** \_\_\_\_\_

**Type of Service Requested:** Single Family \_\_\_\_\_ Home-Based Business \_\_\_\_\_ Commercial \_\_\_\_\_

**Full Legal Name(s):** \_\_\_\_\_

**Street Address (for service):** \_\_\_\_\_

**Billing Address (if different):** \_\_\_\_\_

**Driver License Number(s):** \_\_\_\_\_

**Social Security Number(s):** \_\_\_\_\_

**Phone Number(s):** cell \_\_\_\_\_ work # \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Applicant is:** Owner: \_\_\_\_\_ Renter: \_\_\_\_\_ Other: \_\_\_\_\_

**Transfer Fee \$** \_\_\_\_\_ **30-day Transfer Fee \$** \_\_\_\_\_ **New Tap Fee \$** \_\_\_\_\_

Is there any medical reason that service cannot be interrupted? YES \_\_\_\_\_ NO \_\_\_\_\_ Written verification from a medical doctor is required before meter can be labeled as "NON- CUT OFF". The water bill is still required to be paid in full, but notification will be made prior to disconnect.

The meters are read between the 7<sup>th</sup>—9<sup>th</sup> of each month. Bills will be mailed to customers by the 25<sup>th</sup> of each month. Bills can be paid without penalty until the 15<sup>th</sup> of each month. After the 15<sup>th</sup>, a 10% penalty will be added to the bill. Accounts not paid by the 25<sup>th</sup> of each month will be subject to be disconnected (cut-off) and a fee of \$30 will be charged for reconnection.

Do you have an existing source of water: Yes \_\_\_\_\_ NO \_\_\_\_\_ If yes, then a well user agreement must be filled out.

\_\_\_\_\_ \* Pamphlet given on the Cross-Connection

You agree, in order for us to service your account or to collect any amounts you may owe, we may contact you by telephone at any telephone number associated with your account, including wireless telephone numbers, which could result in charges to you. We may also contact you by sending text messages or emails, using any email address you provide us. Methods of contact may include using pre-reordered or artificial voice messages and/or the use of an automatic dialing device, as applicable. I/We have read this disclosure and agree that the Town of Mosheim may contact me/us as described above.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_