

# WOODFIN WATER DISTRICT APPLICATION FOR SERVICE FOR RENTERS

TODAY'S DATE: \_\_\_\_\_ DATE SERVICE WANTED: \_\_\_\_\_

CUSTOMER NAME: \_\_\_\_\_  
(LAST NAME) (FIRST) (INITIAL)

SERVICE ADDRESS: \_\_\_\_\_  
(CITY) (ZIP CODE)

BILLING ADDRESS: \_\_\_\_\_  
(CITY) (ZIP CODE)

S.S.#: \_\_\_\_\_ DRVS LIC#: \_\_\_\_\_ STATE \_\_\_\_\_ DOB: \_\_\_\_\_

HOME PHONE# \_\_\_\_\_ WORK PHONE# \_\_\_\_\_ CELL PHONE # \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

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## \*\*RENTAL INFORMATION\*\*

LANDLORD OR MANAGEMENT CO: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE#: \_\_\_\_\_

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*THE UNDERSIGNED AGREES TO BE RESPONSIBLE FOR ALL WATER BILLS FOR THIS ADDRESS,  
EFFECTIVE WITH THE SERVICE DATE ABOVE AND CERTIFIES THAT THE ABOVE INFORMATION IS TRUE  
AND CORRECT.*

SIGNED \_\_\_\_\_

REFUNDABLE
SERVICE CHARGE AMT: _____
RECEIPT#: _____
DATE: _____
CASH _____ CHECK _____ CC _____

ENTERED INTO PRESERVICE \_\_\_\_\_ BY \_\_\_\_\_ ENTERED INTO SOFTWATER \_\_\_\_\_ BY \_\_\_\_\_