

Manchester Water & Sewer Department

Business Application for Utility Service

The following information must be accurate to the best of the applicant's knowledge. Applicants providing fraudulent information may be prosecuted to the full extent allowable by law. **Note: MWD will need a photocopy of a photo ID for each applicant listed on the account.**

FOR OFFICE USE ONLY

Account Number _____
Turn on Date _____ Connection Fee _____
Deposit Card # _____ Deposit Amount _____
Proof of Ownership ID ID Co-Applicant
Initials of Person Taking Application _____

Your Information **Today's Date** _____ ***required fields**

Name of Business* _____
First Name* _____ Middle Name* _____ Last Name* _____
Date of Birth* _____ Social Security #* _____ Driver's License #* _____
Tax ID# _____
Business Phone* _____ Fax Number _____ Email Address _____
Service Address* _____ Date Service Requested* _____
Owner/Landlord/Manager of Service Address _____

Business Officers

Name/Title

Person to Contact In Case of Emergency

Name _____ Phone Number _____

Mailing Address (if different than Service Address)

Street Address* _____ Apartment/Lot/Unit Number _____
City* _____ State* _____ Zip Code* _____

This is a two-sided application – Please fill out both sides

I give permission to release any non-vital information on this account

Conditions of Service:

1. Applicant will comply with and be bound by the rules and regulations of Manchester Water & Sewer Department and by signature below will acknowledge this compliance.
2. Disclosure of falsified application will be reason of discontinuation of service and a deposit could be required for continuing service.
3. MWD or its third party collectors will have the right to contact the customer's employer for the purpose of collecting unpaid bills. The customer will pay all expenses, including reasonable attorney's fees, associated with the collection of utility bills.
4. The customer will not be allowed to obtain utility service unless all delinquent accounts of the applicant(s) are brought current.
5. The customer may terminate services by notifying MWD, in person, and sign a disconnect form.
6. Only persons listed on the application will be allowed to arrange disconnection, reconnection or termination of service.
7. I understand that payment is due in full upon receipt of this statement, that all legal methods may be employed to collect any amount due and that failure to make payment when due can result in the account being turned over for collection. I further agree to pay interest and all costs of collection, including a reasonable attorney's fee.

Please print name on line below

I, _____, hereby apply for utility services from Manchester Water & Sewer Department in Manchester, Tennessee. I agree to pay for all services rendered until I terminate service. All information in this application is true and correct to the best of my knowledge.

Applicant's Signature

Date

Co-Applicant's Signature

Date