## APPLICATION FOR WATER/SEWER SERVICE

Address For Service:	
Is the Property Owner Occupied? Y/N	Is the Property ready for Inspection? Y/N
Applicant:	Co-Applicant:
Phone Number: ()	Co-App's Phone#: ()
Date of Birth:	Co-App's Date of Birth:
Last 4 of SNN: ***-**	Co-App's Last 4 of SSN: ***-**
Has applicant(s) had service with City of Benton	n before? Y/N If yes, when?
Do you owe a previous bill with the City? Y/N _	If yes, how much?
Is the property inside Benton City limits? Y/N _	Is this a mobile home? Y/N
Rent	or Own
If renting, renter MUST provide	ed Owner's Authorization prior to service.
Property Owner's Name:	Property Owner's Phone #:()
Date Service Requested:	Request Taken By:
at the address I have requested service. If they are 1	not paid as required, I understand that my water service may my charges related to reconnection of service, as well as any extra costs to recover the payment.
Consumer Deposit Amount:	
Applicant Signature:	E-Signed Date:
Co-Applicant Signature:	E-Signed Date: