## APPLICATION FOR WATER SERVICE -- CITY OF PEA RIDGE WATER UTILITIES

Location #			Service	e Date:	
Name:		Spouse:			
LAST		RST			
SS#	D.O.B.	SS	#		D.O.B
DL#		DL?	#		
Service Address:			Phon	e #:	
	Street				
Mailing/ Forwarding					
	Street	City	State		Zip
				oup:	Group Billing:
Email Address:					Paper - Email - Both
Employer:			Phon	e #:	
Own:Rent:	Landic	ord:		Phone#	
Customer Signature:  Water Dept. Use Onl	v.				
		CCOUNT#	REG#		
SET ME	TER				
					EMAILED
READ IN	LAS	T READING	PRESENT READ	NG	EMAILED
		ST READING	PRESENT READ	ING	EMAILED
	N .	R LOCATION	PRESENT READ	ING	
READ O	N METER		PRESENT READ	ING	EMAILEDdays
READ O	METER	R LOCATION	PRESENT READ	ING	
READ O	METER			ING	
	METER OUT DATE (	R LOCATION  COMPLETED			Prorateddays
	METER DUT DATE (	COMPLETED  OOK ROU	BY  UTE# TRAS  Q#RECYC	SH BINS	Prorateddays
LOCK	METER DUT DATE (	COMPLETED  OOK ROU	<b>BY</b> UTE# TRAS	SH BINS	Prorateddays
LOCK	METER DUT  DATE O  COMPO	COMPLETED  OOKROU UTERSEG	BY  UTE# TRAS  Q#RECYC	SH BINS	Prorateddays
LOCK	METER DUT  DATE O  COMPL LEDGE	COMPLETED  OOK ROU  UTER SEC  ER Wtr	# TRAS  # TRAS  # TRAS  RECYC  / Swr / SwrMain DUMPS	SH BINS CLE BIN STER	Prorateddays  Receipt # Impact Water \$ Impact Sewer \$
LOCK	METER DUT  DATE O  COMPC LEDGE  R  DEPOS NEW S	COMPLETED  OOK ROU  UTER SEG  ER Wtr  EPA  SIT # AMG  SERVICE FEE: AMG	BY  UTE # TRAS  Q# RECYC  / Swr / SwrMain DUMPS  A / Fire / Garb	SH BINS CLE BIN STER	Prorateddays  Receipt # Impact Water \$ Impact Sewer \$ Outside City \$