

Public Water Eligibility Application

Date: _____

Applicant Information

Full Name: _____ Spouse Name: _____
Last First M.I.

Location of Property: _____
Street Address ¼ Section/Township/Range

City State ZIP Code

Phone: _____ Email _____

Specify use of meter Residence _____ Development _____ Business/Commercial _____
If **residence**, specify how many in household: Adults (18 & up): _____ Children: _____

If **development**, specify how many lots: _____ Phases: _____

If **business/commercial** specify estimated number of gallons of water to be used daily: _____ (meter size determined by usage)

Please indicate CDIB Information. It will help in receiving grants for system improvements.

CDIB Indian Card? Yes No If Yes, CDIB _____

Member Signature & Statement

The undersigned hereby applies to _____ for membership and for water service, and hereby agrees, that upon approval hereof, I/we will comply with and be bound by all Rules and Regulations of _____ and agree to pay all fees, assessments, and other lawful amounts chargeable to the member.

Member's Signature

Date

For OFFICE Use Only

PUBLIC WATER

Line Size/Description: _____

Location: _____

Approved

Not Approved

Date _____

Notes: _____