

SOUTHERN MONTGOMERY COUNTY MUNICIPAL UTILITY DISTRICT

COMMERCIAL SERVICE APPLICATION FOR WATER AND SEWER SERVICE

Receipt No. _____

Company Name: _____ Account No.: _____

Service Address: _____ Today's Date: _____

Contact Person: _____ Tax ID No.: _____

Mailing Address: (If different from service address) _____

City: _____ State: _____ Zip: _____

E-mail: _____

Phone No.: _____ Fax No.: _____

Deposit Amount \$ _____ Date Paid: _____

I request water and sewer service at the above premises and agree to use and pay therefore in accordance with the District's established rates and rules. I further agree to be responsible for all charges for water and sewer service for the above premises until I request discontinuance of such service and final bill.

I agree: (1) the District shall not be liable for damage of any kind whatsoever resulting from water or the use of water on the above premises, unless such damage results directly from negligence of the District. (2) the District shall not be responsible for damage done by or resulting from any defect in the piping, fixtures or appliances on the above premises; (3) to maintain in serviceable condition all sewer lines within the boundaries of applicant's premises; (4) to furnish and maintain a private cut-off valve on my side of the water meter and (5) the District shall not be liable for any damage or injury arising from interruption, inadequacy or non-availability of water or sewer service.

I understand that: (1) bills will be figured in accordance with the District's established rate schedule with water services based on the meter reading of the amount consumed for the period; (2) bills due and payable upon presentation and payment may be made at the office of the District; and (3) bills must be paid prior to the 20th of the current month in order to receive the discount, after the 20th, the gross amount is due.

The District can terminate water and sewer service for non-payment of the bill.

Date Service Begin _____

Applicant's Signature _____

I UNDERSTAND THAT THESE STATEMENTS ARE MADE IN ACCORDANCE WITH THE ESTABLISHED POLICIES OF THE DISTRICT.

YOU HAVE A RIGHT TO REQUEST CONFIDENTIALITY OF YOUR PERSONAL INFORMATION HELD BY THE WATER DISTRICT BY PLACING AN "X" IN THE BOX.