

McIntosh County
PO Box 584 – 1200 Northway – Darien, Georgia 31305

UTILITY SERVICE APPLICATION

Type of Service: New Connection Transfer Disconnection Real Estate Inspection

Service Agreement: The following are the terms of the service agreement between the MCBC Water

Department and _____
(Print Names)

Located at: _____

_____ (New Service Address, including City & Zip Code)

Address you are transferring from: _____

Billing Address: _____

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Applicant is: Landowner Tenant Realtor

Driver's License # (Copy Required) SS #

Driver's License # (Copy Required) SS #

Home # Business # Cell #

e-mail:

Effective Date: (minimum 2 days to activate or disconnect service)

Type of Service: Residential Commercial

"The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in the program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your applicant or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin and gender of individual applicants on the basis of visual observation or surname."

<input type="checkbox"/> White, not of Hispanic Origin	<input type="checkbox"/> Asian	<input type="checkbox"/> Male
<input type="checkbox"/> Black, not of Hispanic Origin	<input type="checkbox"/> Native Hawaiian	<input type="checkbox"/> Female
<input type="checkbox"/> American Indian or Alaskan Native	<input type="checkbox"/> Hispanic	

"This is an Equal Opportunity Program. Discrimination is prohibited by Federal Law. Complaints of discrimination should be sent to: USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TDD)."

Customer Signature: _____ Date: _____

Print Customer Name: _____

Customer Signature: _____ Date: _____

Print Customer Name: _____

OFFICE USE ONLY

Account # _____

Amount of Deposit: _____ Date Paid: _____ Cash Check

Meter Serial #: _____ Meter Make: _____

Meter Number of Fixed Zeros: _____