

CITY OF WAYCROSS, GEORGIA

REQUEST FOR WATER & SEWER SERVICES



Application Date

Applicant/Contact Company Name

Phone Fax Mobile

Location

Bill To Name SS#

Bill To Address Owner

SS Card Photo ID

<i>Applicant Please Complete Below</i>		<i>For Office Use Only</i>	
<u>Service Requested</u>	<u>Size</u>	<u>Cost</u>	
Potable Water Tap			
Sanitary Sewer Tap			
Irrigation Water Tap			
Fire Protection Water Tap			
	Total Cost		Check # <input type="text"/>

Comments:

Requested By

<i>For Office Use Only</i>			
Potable Water Tap Information			
Meter Size <input type="text"/>	Meter # <input type="text"/>	Reading <input type="text"/>	
New Account <input type="text"/>	Renew Inactive <input type="text"/>	Sewer Charge <input type="text"/>	Date Installed <input type="text"/>
Sanitary Sewer Tap Information			
Tap Size <input type="text"/>	New Account <input type="text"/>	Date Installed <input type="text"/>	
Irrigation Water Tap Information			
Meter Size <input type="text"/>	Meter # <input type="text"/>	Reading <input type="text"/>	Date Installed <input type="text"/>
Fire Protection Water Tap Information			
Tap Size <input type="text"/>	Date Installed <input type="text"/>	Form Completed By <input type="text"/>	