

# RESIDENTIAL SERVICE APPLICATION

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

OWNER(S): \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CONTACT #: \_\_\_\_\_ WORK TELEPHONE: \_\_\_\_\_

I hereby apply for service to be supplied from Anthony Water & Sanitation District in consideration of the provisions of such service I agree to conform to the rules and regulations established by the ordinances of the said District as a condition for use of such service and do hereby particularly agree and conform to the provisions of ordinances if the District and laws of the State of New Mexico applying to the District.

In consideration of the service to be given, the consumer agrees that the District shall not be responsible for damages or injury caused by water/sewer escaping from the District's line, until after the District shall have been notified of the leakage by the consumer and has been given reasonable time to repair the leak or problem.

In consideration of services to be provided, the consumer agrees that under no circumstances is the water meter to be enclosed by fencing or any other structure. Water must be accessible for maintenance at anytime without structure interference. Failure to comply will force the District to take legal measures and disconnect water services.

An \$85.00 water deposit is required on all accounts before the service is activated. It is refundable within 2 years of good standing to property owners. The deposit will not be refunded to renters until the account is closed and the final charges have been paid or subtracted from the water deposit. The Renter/Owner has 1 year from the date the service is closed to claim the remaining deposit. If the remaining deposit is not claimed within the allowed time, the deposit will no longer be refunded.

**\*Property owner will be responsible for all metered water charged in excess of deposit upon finalizing account**

**\*Property owner will notify the District in writing of any change in user**

**\*\*Any applicant not approved for service for whatever reason, will still be responsible for the administrative fee of \$65.03**

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 evaluation of your application to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national original of individual applicants on the basis of visual observation or surname.

- White    Black    Hispanic    American Indian or Alaskan Native    Asian or Pacific Islanders

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Renter's Signature

\_\_\_\_\_  
Attest

\_\_\_\_\_  
Renter's Signature

In WITNESS Hereof I have Hereunto set my hand this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_  
Anthony Water & Sanitation District:

\_\_\_\_\_

**FOR OFFICIAL USE ONLY:**

ACCOUNT#: \_\_\_\_\_

PARCEL#: \_\_\_\_\_

MOBILE: \_\_\_\_\_ HOUSE: \_\_\_\_\_ APT: \_\_\_\_\_

WATER: \_\_\_\_\_ SEWER: \_\_\_\_\_

DATE DEPOSIT PAID: \_\_\_\_\_

ID # TAKEN: \_\_\_\_\_

METER NUMBER: \_\_\_\_\_

SERIAL NUMBER: \_\_\_\_\_

WO# \_\_\_\_\_

BEGINNING READING: \_\_\_\_\_

BOOK SEQUENCE: \_\_\_\_\_

BILLING CYCLE: \_\_\_\_\_

STATUS: ACTIVE OR INACTIVE UNTIL: \_\_\_\_\_

PERMIT#: \_\_\_\_\_

CLERK'S INITIALS CONFIRMING THAT APPLICATION IS COMPLETE: \_\_\_\_\_