

**COTTAGEVILLE PUBLIC SERVICE DISTRICT**

**APPLICATION FOR SERVICE**

DATE SERVICE REQUESTED \_\_\_\_\_  
WATER { } SEWER { } BOTH { } ROW { } DEED { }  
NEW CUSTOMER { } PREVIOUS CUSTOMER { } IF SO, WHEN \_\_\_\_\_

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

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

PROPERTY LOCATION: \_\_\_\_\_

RENT { } OWN { } OTHER { } PRIMARY PHONE#: \_\_\_\_\_

TYPE OF SERVICE: RESIDENTIAL { } PROPERTY OWNER: \_\_\_\_\_

\*COMMERCIAL { } TELEPHONE #: \_\_\_\_\_

\*INDUSTRIAL { } ADDRESS: \_\_\_\_\_

\*SPECIFIC TYPE OF WATER SERVICE REQUESTED: \_\_\_\_\_

APPLICANT'S PLACE OF EMPLOYMENT \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

CO-APPLICANT'S NAME: \_\_\_\_\_

CO-APPLICANT'S PLACE OF EMPLOYMENT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

I HEREBY AUTHORIZE SERVICE TO BE ESTABLISHED IN MY NAME AT THE ABOVE PROPERTY LOCATION AND AGREE TO PAY FOR SERVICE UNTIL **DISCONTINUED AT MY REQUEST IN WRITING**. I UNDERSTAND THAT THIS APPLICATION IS ACCEPTED SUBJECT TO THE AVAILABILITY OF SERVICE AT THIS LOCATION AND PURSUANT TO THE RULES AND REGULATIONS OF THE WV PUBLIC SERVICE COMMISSION.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

CO-APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**DISCLAIMER**

It is the customer's responsibility to supply to the Cottageville Public Service District any changes that may occur in their contact information. Accounts should be updated as necessary and telephone numbers and address changes should be updated accordingly.

By: \_\_\_\_\_ Date: \_\_\_\_\_

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 this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race, ethnicity and sex of applicants on the basis of visual observation or surname.

\_\_\_ I do not wish to furnish this information

Ethnicity:

\_\_\_ Hispanic or Latino

\_\_\_ Not Hispanic or Latino

Sex:

\_\_\_ Male

\_\_\_ Female

Race: (Mark all that apply)

\_\_\_ White

\_\_\_ Black or African American

\_\_\_ American Indian or Alaska Native

\_\_\_ Asian

\_\_\_ Native Hawaiian or Other Pacific Islander

**A \$50.00 DEPOSIT IS DUE FOR ALL NEW WATER ACCOUNTS**

**A \$80.00 DEPOSIT IS DUE FOR ALL NEW SEWER ACCOUNTS**

Discrimination is prohibited by Federal Law.  
Complaints of discrimination may be filed with the Secretary of Agriculture, USDA, Washington, D.C. 20250-0700.