Customer Application for Service

CAMDEN COUNTY

PWSD #4

P: 573-365-6792

PO Box 9/62 Bittersweet Rd Lake Ozark, MO 65049

EMAIL: DARNOLD@CAMDENPWSD4.COM

www.camdenpwsd4.com (sign up for Alerts via email and/or text)

*****A COPY OF YOUR DRIVER'S LICENSE IS REQUIRED*****

(PLEASE INCLUDE FIRST AND LAST NAMES OF ALL PARTIES THAT ARE TO BE LISTED ON THE ACCOUNT AND HAVE RIGHTS TO MAKE INQUIRIES ON THE ACCOUNT. (PARTY #1) FIRST NAME LAST NAME (PARTY #2) FIRST NAME ____LAST NAME IF WISHING TO USE A BUSINESS NAME: _____ CONTACT PERSON for the Business: SERVICE ADDRESS _____ BILLING ADDRESS CITY, STATE, ZIP PARTY #1 PHONE: _____ PARTY #2 PHONE:____ SERVICE START DATE (IT MAY TAKE AT LEAST ONE BUSINESS DAY TO SET UP) OWN____ RENT___ LANDLORD NAME_____ PHONE #____ LANDLORD ADDRESS CITY, STATE, ZIP CHOOSE ONLY ONE: PAPERBILL ___ EMAILBILL ____ EMAIL ADDRESS____ DO YOU HAVE A BACK FLOW PREVENTER (IE: SPRINKLER SYSTEM, SWIMMING POOL, ETC) NO HOA SPRINKLERS (IF YES --MUST BE CHECKED ANNUALLY AND REPORT SUBMITTED TO CAMDEN COUNTY PWSD #4) SIGNATURE (PARTY #1) DATE SIGNATURE (PARTY #2) DATE DO NOT WRITE BELOW THIS LINE-FOR OFFICE USE ONLY TODAY'S DATE _____ START DATE ACCOUNT NUMBER

YOUR WATER AND/OR SEWER ACCOUNT WILL BE BILLED MONTHLY. METERS ARE READ AT THE END OF EACH MONTH AND BILLED ACCORDINGLY. WE ACCEPT CASH, CHECKS, CREDIT CARDS (ONLINE ONLY), AND DIRECT DEBIT VIA ACH. A DEPOSIT WILL BE ASSESSED ON YOUR FIRST BILL (\$50.00 FOR WATER ONLY/\$125.00 FOR WATER/SEWER) AFTER 24 CONSECUTIVE TIMELY PAYMENTS OR CANCELLATION OF SERVICE, THE DEPOSIT WILL AUTOMATICALLY BE CREDITED TO THE ACCOUNT.

I agree to the Camden County PWSD#4 Rules and Regulations available at www.camdenpwsd4.com or 62 Bittersweet Lake Ozark, MO 65049 that are now or hereinafter in effect until i notify Camden County PWSD#4 to terminate service. I further understand that should I decide to rent my premises, I am still responsible for the payment of said service.