

OZARK WATER DEPARTMENT

APPLICATION FOR WATER SERVICE

Customer: Please Fill Out All Requested Information

PLEASE PRINT CLEARLY

Primary Applicant

Name: _____ Today's Date: _____ Service Start Date: _____
Billing Address: _____ Service Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone: _____ Social Security # _____
Cell Phone: _____ Drivers License # _____
Work Phone: _____ E-Mail: _____

Co-Applicant

Name: _____
Cell Phone: _____ Social Security # _____
E-Mail: _____ Drivers License # _____

General Information

Please Check One

Are You _____ RENTING _____ BUYING your residence _____ OTHER -Landlords Name _____

Have you had water service in your name in Ozark Before? _____ YES _____ NO IF yes, When? _____

Have you ever had water service in your name? _____ YES _____ NO If yes, where? _____

I agree to the contents of the City of Ozark Water Department Customer Service Policy

Primary Applicant Signature: _____ Date: _____

Account #: _____ Date Service Requested: _____

Water Deposit: \$75.00 Security Deposit
(Refundable At Service Termination)

Reconnect Fee: \$35.00 (Non-Refundable)

Trash Service Is Required On All Residential Customers Within The City Limits Per City Ordinance