NORTHEAST PUBLIC WATER AUTHORITY
66 FLORENCE DR
MOUNTAIN HOME, AR 72653
(870)492-4211 or Fax (870)492-4214

NEW ACCOUNT SETUP – ¾" Meter

DATE:

I _____hereby make application to the Northeast Public Water
Authority (hereinafter called Company) to be a water user in the Company and for water service
at the following location:
   FOR SERVICE ADDRESS:_____ ACCOUNT#_____

             Meter #:_____ Meter Size: <u>3/4"</u>

I agree:
1. **To maintain at my expense the necessary line to cause this property described above which is owned or occupied by me to be connected with the water works system at the property line.**
2. 117602508.   To begin using water immediately after being notified by the Company that service is available, or to pay not less than the minimum water bill after notification of the Company that service is available, whether or not a connection is made or water consumed. It is further understood that any consumption in excess of the minimum rate will be charged for in accordance with the schedule of the monthly rates to be published by the Company.
3. 117602604.   To use the water in accordance with rules and regulations to be established by the Company and to promptly pay for the water at the applicable schedule of rates.
4. 117592480.   To pay water user deposit of $70.00, said fee being refundable in accordance with the rules and regulations of the company, and an account set up fee of $ 20.00 which is not refundable.

It is further understood that if, for any reason, the Company is unable to provide me with water service anticipated by this application, the full amount will be refunded to me.

WATER USER DEPOSIT $ 70.00
<u>NEW ACCOUNT SETUP FEE</u> $ 20.00
TOTAL DUE $ 90.00   _____Signature of Owner

Billing Address:

Social Security #or FID#   _____   Drivers License #_____ State

Phone # _____ Secondary Phone # _____

Email:
Would you like to also receive a paper bill for a $1.00 monthly fee? Yes or No

PLEASE   □ WHITE □ AFRICAN AMERICAN □ ASIAN □ LATINO □ NATIVE AMERICAN □ PACIFIC ISLANDER
CHOOSE: □ PREFER NOT TO ANSWER
        □ MALE □ FEMALE □ NON-BINARY □ PREFER NOT TO ANSWER

       THIS INSTITUTION IS AN EQUAL OPPORTUNITY PROVIDER, AND EMPLOYER

_____

 FOR OFFICE USE: DEED:_____PAID: _____ BY: _____ CASH: _____ CHECK#: _____
The above water user account number is issued and accepted in accordance
 and subject to the conditions and restrictions stipulated in the articles of incorporation and
By-laws and amendments to the same of the Northeast Public Water Authority.

OLD ACCOUNT HOLDER: