

CENTER TOWNSHIP WATER AUTHORITY

224 CENTER GRANGE ROAD ALIQUIPPA, PA 15001 PHONE 724-774-7960

APPLICATION FOR WATER SERVICE

_____ OWNER _____ TENANT _____ OWNER/RENTAL PROPERTY

DATE: _____ ACCOUNT NO.: _____ INITIAL DATE OF SERVICE: _____

PROPERTY OWNER: _____

ADDRESS: _____

TELEPHONE NO.: _____

TENANT: _____

ADDRESS: _____

TELEPHONE NO.: _____

RENTAL PROPERTY: _____

ADDRESS: _____

The undersigned hereby agrees to abide by all applicable Ordinances of the Township of Center and applicable Resolutions and Regulations of the Center Township Water Authority, including, but not limited to, the timely payment of water bills at the rate now or hereafter prevailing and shut off of water for failure to pay water bills.

CASH _____ CHECK _____ C.C. _____

A \$ _____ rent deposit, payable to C.T.W.A. is required of all tenants who will be responsible for paying water bills. This deposit will be returned to the tenant upon moving out of the premises and timely payment of the final bill. In the event that any tenant who occupies the premises fails to make timely payment of water bills at the rates now or hereafter prevailing, the undersigned shall be responsible for the said water bills. Failure to pay shall result in the shut off of water service until payment in full is received.

APPLICANT'S SIGNATURE: _____ (DATE)

DATE DEPOSIT PAID _____ RECEIPT NO. _____

AUTHORIZED SIGNATURE: _____ (DATE)

WHITE – FILE COPY

YELLOW – OWNER COPY

PINK – TENANT COPY