APPLICATION FOR SERVICE

\$<u>200.00</u> refundable security deposit NOW due.

NORTH GUALALA WATER COMPANY INC. P. O. Box 1000, Gualala, CA 95445-1000 PH (707) 884-3579/FAX (707) 884-1620 Email: office@ngwco.com

ACCOUNT #:
Requested Start Date:

Please complete & return before service can be initiated.

Physical Address:	
Property Owner:	Phone #::
Property Owner Mailing Ad	ldress:
ACCOUNT NAMES:	Prior Service? If YES Address:
Primary Name:	Secondary/Spouse:
Mailing Address:	
Primary Phone#:	Secondary Phone #:
Email:	
1st Name-Place of Employ	/ment:
Work Phone #:	
Social Security #:	Drivers Lic. #:
2nd Name-Place of Emplo	yment:
Work Phone #:	
Social Security #:	Drivers Lic. #:
Bank Name, Branch, Addre	ess:
understand if the accou	ualala Water Company (NGWC) the right to verify all of the above credit information. In the undersigned all costs and expenses. A \$35.00 fee will also be charged on all Returned Checks.
Enclosed: Tariffs Schedule	1 & LC; Electronic Funds Transfer
Signed	Date:
Signed	Date: