

NORRIDGEWOCK WATER DISTRICT, 90 MERCER RD, P.O. BOX 96, NORRIDGEWOCK, ME 04957
Tel: 207-634-2660 Fax: 207-634-2660 E-mail: norridgewockwaterdistrict@gmail.com Website: www.norridgewockwater.com

APPLICATION FOR WATER SERVICE

The undersigned hereby contracts for water service from the mains of the Norridgewock Water District for location at:

Service Address: _____

Mailing Address: _____

If Business, please state name of business: _____

____ Residential ____ Single family ____ Multi-unit # of units ____ Commercial ____ Fire protection ____ Industrial

____ Home business on-site, ____% of building used for non-residential purposes (as required by Maine Revenue Services 207-624-9693)

I agree to abide by the Terms and Conditions of the Norridgewock Water District now in force or which may hereafter be ordered or approved by the Maine Public Utilities Commission (PUC). The undersigned further agrees to be responsible for all payments for water services at the premises described above at the rates now in force or which may be hereafter ordered or approved by the Maine PUC. Payments for such service shall be paid by the undersigned until services are terminated.

____ OWNER ____ TENANT ____ LANDLORD (Landlord Name) _____

____ // _____
APPLICANT PRINT NAME CO-APPLICANT PRINT NAME

____ // _____
(SIGNATURE) (DATE) (SIGNATURE) (DATE)

E-MAIL ADDRESS: _____

TELEPHONE # or MESSAGE #: _____ // _____

APPLICANT EMPLOYER/ SOURCE OF INCOME: _____ CO-APPLICANT EMPLOYER/ SOURCE OF INCOME: _____

(address) _____ (address) _____

(telephone #) _____ (telephone #) _____

****APPLICANT: Please note that if the water is currently off at the property, we will need your completed application and \$50 Water Turn-On Fee before we can schedule an appointment to restore water service. If the water is currently on, there is a \$20 Establishment of Service Fee. Applications can be emailed back, returned by mail, or dropped at our office (open Wed/Thurs 9am-1pm or use drop slot in office door).**

Previous address: _____

How long at previous address: _____

Do you have unpaid bills at this utility or for any other kind of utility service? ____ Yes ____ No

If yes, where? _____

Have you filed bankruptcy within the past 6 years? ____ Yes ____ No

The Norridgewock Water District requests the following information in order to assure the Federal Government, acting through the USDA Rural Development, the Federal Laws prohibiting discrimination against applicant on the basis of race, national origin and sex are complied with. You are not required to furnish this information but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, the Norridgewock Water District is required to note the race/national origins and sex of the individual applicants on the basis of visual observation or surname.

Applicant/Co-Applicant, please check one of the following:

Race/National Origin:

- White, not of Hispanic Origin,
- Asian or Pacific Islander,
- American Indian or Alaskan Native
- Black, not of Hispanic Origin,
- Other (specify) _____

Sex: Male Female

Race/National Origin:

- Hispanic, White, not of Hispanic Origin, Hispanic,
- Asian or Pacific Islander,
- American Indian or Alaskan Native
- Black, not of Hispanic Origin,
- Other (specify) _____

Sex: Male Female

\$20/\$50 Fee - Date Received _____

Ck# _____

_____ service active date