

HILLSVILLE WATER AND WASTEWATER SYSTEMS
APPLICATION FOR UTILITY SERVICES

Account Name: _____

Mailing Address: _____

Location of Service: _____

TWO FORMS OF IDENTIFICATION REQUIRED:

(1) Photo ID – Valid Virginia Driver's License, Virginia Photo ID card, or Resident Alien card
(attach copy of photo ID to Utility Application) _____

(2) Name ID – Car or Voter Registration card or valid Debit/Credit card _____

(MANDATORY) Soc.Sec.#, Drivers Lic.#, Fed. ID #, or Resident Alien card # _____

Telephone: (Home) _____ (Mobile) _____ (Work) _____

Account #: _____
Location #: _____
Date Opened: _____
Clerk: _____

Email Address: _____ Deposit Due:\$ _____

Race: _____
(for reporting requirements only)

Deposit Waived: _____
_____ (reason)

I request to have _____ Water and/or _____ Wastewater utility services provided to my
_____ Residence/ _____ Business by the Town of Hillsville. I wish services to begin on the
following date: _____ / _____ / _____ at _____ (scheduled time).

I understand and will adhere to the ordinance regulating such water and/or wastewater accounts and their termination.

NOTE: For your convenience, the ordinances pertaining to water and wastewater utilities are located in the front lobby in the Town Office. If you have any questions regarding the above, please feel free to ask the Utilities/Payroll Coordinator.

Signature of applicant(s)