

HILLSVILLE WATER AND WASTEWATER SYSTEMS
APPLICATION FOR UTILITY SERVICES

Account Name: _____

Mailing Address: _____

Location of Service: _____

TWO FORMS OF IDENTIFICATION REQUIRED—make copies & attach to application:

One photo ID (valid Driver's License, Photo ID card, or Resident Alien card);

Name verification ID (social security card, insurance card, voter registration card, valid Debit/Credit card)

Social Security #, Resident Alien card, or Fed. ID # (for business): _____

Account #: _____

Telephone: (Home) _____

Location #: _____

(Mobile) _____

Date Opened: _____

(Work) _____

Clerk: _____

Email Address: _____

Deposit Due:\$ _____

Deposit Waived: _____

Race: _____
(for reporting requirements only)

(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)