

# NEW SERVICE

**DUE TO THE FRONT OFFICE BEING CLOSED TO THE PUBLIC AT THIS TIME, PLEASE ADHERE TO THE FOLLOWING DIRECTIONS TO APPLY FOR NEW SERVICE:**

- **COMPLETE THE FORM FOR TEMPORARY SERVICE THAT IS PROVIDED FOR YOU ON THE CLIP BOARD OUTSIDE. AFTER COMPLETING THE FORM, PLACE IT IN THE DROP BOX.**
- **GET THE ATTENTION OF THE CUSTOMER SERVICE REPRESENTATIVE TO INFORM THEM THAT YOU NEED NEW SERVICE.**
- **MAKE DRIVERS LICENSE VISIBLE TO BE PHOTOGRAPHED.**
- **THE \$100.00 DEPOSIT MAY BE PLACED IN THE DROP BOX OR MADE OVER THE PHONE WITH A CREDIT/DEBIT CARD. (334) 872-6205 (WATER WILL NOT BE TURNED ON UNTIL PAYMENT IS RECEIVED.**
- **A RECEIPT WILL BE MAILED TO YOU AT THE ADDRESS OF SERVICE OR AT THE ADDRESS OF YOUR CHOICE.**

## **NOTE**

**WHEN THE FRONT OFFICE IS OPENED BACK UP TO THE PUBLIC, YOU WILL BE NOTIFIED AND REQUIRED TO COME TO THE OFFICE AND FOLLOW THE USUAL PROCEDURE TO APPLY FOR NEW SERVICE.**

**FAILURE TO DO SO WILL RESULT IN YOUR METER BEING LOCKED. WE APOLOGIZE FOR THE INCONVENIENCE AND ASK THAT YOU CONTINUE TO BE PATIENT WITH US AS WE TRY TO FIND THE BEST WAY TO SERVE YOU DURING THESE TRYING TIMES.**

# THE WATERWORKS AND SEWER BOARD OF THE CITY OF SELMA

RODERICK V. WEST, VICE CHAIRMAN  
MICHAEL L. JOHNSON, DIRECTOR  
JAMES E. WARE, DIRECTOR

ROBERT L. ALLEN  
CHAIRMAN

MAYOR DARRIO MELTON  
SUPERINTENDENT

## APPLICATION FOR TEMPORARY WATER SERVICE

NAME \_\_\_\_\_ PHONE# \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_ DRIVER'S LICENSE / ID # \_\_\_\_\_

SERVICE ACCOUNT ADDRESS \_\_\_\_\_  
\_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

ADDRESS AND PHONE # OF THE NEAREST RELATIVE NOT LIVING IN YOUR HOME.

\_\_\_\_\_  
\_\_\_\_\_

DATE SERVICE WILL START \_\_\_\_\_

I UNDERSTAND AND AGREE TO ALL OF THE FOLLOWING FEES AND TERMS LISTED BELOW:

WATER DEPOSIT \$100.00

- TEMPORARY SERVICE FOR RESIDENTIAL 30 DAYS
- TEMPORARY FOR BUSSINESS 60 DAYS

I AGREE THAT ALL SERVICE BILLING ARE DUE AND PAYABLE FOR WATER AND SEWAGE WHEN RECEIVED. SERVICE WILL BE TURN OFF AFTER 30 DAYS FOR RESIDENTIAL AND 60 DAYS BUSINESS.

**\*LATE FEES WILL BE APPLIED TO DELINQUENT BILLS\***

CUSTOMER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

CUSTOMER SERVICE REPRESENTATIVE SIGNATURE: \_\_\_\_\_

Board approved 09/21/2009