

Office Use Only
Account Number: _____

City of Hawkinsville
96 Broad Street
P.O. Box 120
Hawkinsville, GA 31036
478-892-3240

Customer Service Agreement

This agreement must be completed by the person listed on the lease or the owner of the property. Utility turn-on may take up 1-2 days to complete.

Service Location Information

Name: _____

Service Address: _____

Mailing Address (if different from above): _____

City: _____ State: _____ Zip: _____

Telephone Number: _____

Employer: _____

Social Security Number: _____

Emergency Contact

Name: _____

Phone Number: _____

Relationship to Customer: _____

Date Service Desired: _____

Own: _____ Rent: _____

Landlord's name & number: _____

**After 12 months of non-delinquent payment history & no returned checks, deposits will be credited back to the customers account.

****Service connections fees are non-refundable.****

Have you ever had water or gas in the City of Hawkinsville before? Yes ___ No ___
If yes, where and when? _____

By signing this agreement, I acknowledge that I am responsible for the billing of this meter until such time that I notify the City of Hawkinsville of a new resident moving into the house. Further, I hereby grant access to the City to my property for the purpose of fixing, installing, removing, checking, or reading the meter installed on my property.

I also acknowledge that meters and meter boxes are the property of the City of Hawkinsville and shall remain so and the City of Hawkinsville shall have the authority to control and regulate its use.

I also hereby acknowledge that I am prohibited by City ordinances from connecting my plumbing to any other water source while connected and receiving service from the city including, but not limited to, wells located on my property or from any other private water source that are either presently installed or ones installed in the future.

I acknowledge that I have received a copy of this Service Agreement.

Signature of Customer

Printed Name

Date

FOR OFFICE USE ONLY:

Water Meter # _____

Gas Meter # _____

Garbage Service _____

Water: Connection Fee _____ Deposit _____

Gas: Connection Fee _____ Deposit _____