



**CUSTOMER INFORMATION SHEET**

Please fill out and return

**JEFFERSON COUNTY RURAL WATER DISTRICT #10**

9383 Delaware Dr, Ozawkie, KS 66070

(785) 876-2639

Email: waterdistrict10@gmail.com

**Primary Contact**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**Secondary Contact**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**Billing Address if Different from Above**

Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**I authorize Jefferson County Rural Water District #10 to text message and/or email information to me at the contact information I have provided above.**

**Signature:** \_\_\_\_\_ **Signature** \_\_\_\_\_  
**Date:** \_\_\_\_\_

**Internal Use:**

New Service Date: \_\_\_\_\_ Stop Service Date: \_\_\_\_\_  
Deposit Received: \_\_\_\_\_ Amount \$ \_\_\_\_\_  
Deposit Returned: \_\_\_\_\_  
Meter Purchase: \_\_\_\_\_ Amount \$ \_\_\_\_\_  
Meter Number: \_\_\_\_\_