## **FAIRVIEW WATER DISTRICT**



## **APPLICATION FOR WATER SERVICE**

NEW SERVICE -- DISCONNECT SERVICE -- UPDATE ACCOUNT INFORMATION

Service Address:		
Service Start Date:	Service End Date:	
Applicant Information		
Legal Name(s):		
Billing Address:		
City:	State:	Zip:
Authorized Secondary Contact: _		
Phone Number:	Email:	
NOTE TO STAFF:		
Property Owner Information (If d	ifferent from above)	
Name(s):		
Address:		
Phone Number:	Email:	
Property Management Informati	on	
Company Name:		
Authorized Contact:		
Address:		
	Email:	
	OFFICE USE ONLY	
Mater Number	Account Number	
	SDC Paid (Date)	
Route Location	, ,	
	Before	
Comments		