

**APPLICATION FEE AND DEPOSITS ARE  
REQUIRED FOR ALL ACCOUNTS:**

**Tenant Occupied: \$150.00**

**Owner Occupied: \$100.00**

**Application Fee: \$10.00**

**Drivers License/Pic ID Required**

**Social Security Number Required**

City of Bevil Oaks Public Works

13560 River Oaks Boulevard

Beaumont, Tx. 77713

409-753-1475 or 409-753-2126

FAX: 409-753-1404

Application for Water/Sewer Services

**OFFICE USE ONLY**

New Account #: \_\_\_\_\_

Deposit Paid: \$ \_\_\_\_\_

Application Fee: \$ \_\_\_\_\_

Type of Pmt: \_\_\_\_\_

CK# \_\_\_\_\_

Beginning Read: \_\_\_\_\_

Date Services Begin: \_\_\_\_\_

Water/Sewer Only: \_\_\_\_\_ 2<sup>nd</sup> Meter: \_\_\_\_\_

Water/Sewer/2<sup>nd</sup> Meter: \_\_\_\_\_

Entered: \_\_\_\_\_ Date Entered: \_\_\_\_\_

Scanned: \_\_\_\_\_ Date Scanned: \_\_\_\_\_

I HEREBY APPLY TO THE CITY OF BEVIL OAKS PUBLIC WORKS TO FURNISH WATER/SEWER SERVICES TO THE PROPERTY LOCATED AT THE  
FOLLOWING ADDRESS:

BEAUMONT, Tx. 77713

**I AM LEASING THE PROPERTY:** ☐

(COPY OF LEASE AGREEMENT REQUIRED)

PER THIS APPLICATION, I UNDERSTAND AND AGREE, THAT IF SUCH SERVICE IS APPROVED, TO ABIDE BY ALL CITY OF BEVIL OAKS PUBLIC  
WORKS ORDINANCES AND REGULATIONS RELATING TO SUPPLY OF SUCH SERVICE. I UNDERSTAND THAT THE METER BOX AND ITS CONTENTS  
ARE THE PROPERTY OF THE CITY OF BEVIL OAKS. UNDER NO CIRCUMSTANCES AM I OR MY AGENTS AUTHORIZED TO REMOVE THE METER OR  
OTHERWISE TAMPER WITH THE METER IN ANY WAY. TO DO SO SUBJECTS ME TO A TAMPER FEE OF NOT LESS THAN \$100 OR MORE THAN \$500.  
THE CITY MAY ALSO PRESS CHARGES AGAINST ME FOR TAMPERING AND THEFT OF SERVICES SHOULD WATER BE  
TURNED ON WITHOUT City authorization. **INITIAL:** \_\_\_\_\_

**I AM THE OWNER OF THE PROPERTY:** ☐

(COPY OF DEED/CLOSING DOCS REQUIRED)

\*\*\*\*Please note, the water contractors will come unlock the water meter, but WILL NOT turn on if no one is home. **INITIAL:** \_\_\_\_\_

Primary Name: \_\_\_\_\_

Secondary Applicant Name: \_\_\_\_\_

Anticipated # of full-time residents at the premises: \_\_\_\_\_

Primary SS#: \_\_\_\_\_

Secondary SS#: \_\_\_\_\_

Primary Driver's License #: \_\_\_\_\_

Secondary Driver's License #: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_

Secondary Phone #: \_\_\_\_\_

Primary Email: \_\_\_\_\_

Secondary Email: \_\_\_\_\_

Primary Employer & Address:

Secondary Employer & Address:

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

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

Job Title: \_\_\_\_\_

Job Title: \_\_\_\_\_

Phone #: \_\_\_\_\_

Phone #: \_\_\_\_\_

Local Friend or Relative:

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone #: \_\_\_\_\_

Primary Applicant's Signature

Date

Secondary Applicant Signature

Date

City Employee Signature

Date