

CID#: _____ ACCOUNT #: _____ CYCLE#: _____

THE CITY OF ENTERPRISE WATER WORKS – APPLICATION FOR NEW ACCOUNT – BUSINESS/COMMERCIAL (PAGE #1)

PO Box 311000, ENTERPRISE, AL 36331-1000 PHONE: 334-347-1211 FAX: 334-348-2613 www.cityofenterprise.net

NON REFUNDABLE CONNECTION FEE FOR EACH METER AND FOR FIRE SUPPRESSION IS REQUIRED AT TIME OF APPLICATION AS FOLLOWS:

- (1) Restaurant: \$200.00 (2) Business / Commercial / Industrial: \$100.00 EACH METER 3. Fire Suppression: \$100.00
(4) Multi Appt Complex or Trailer Park: \$35.00 per unit not to exceed \$300.00

Please complete all information below, then print and sign the document and mail along with your Connection Fee to the City of Enterprise Water Works.

IT IS THE CUSTOMER'S RESPONSIBILITY TO NOTIFY THE WATER DEPARTMENT WHEN THEY VACATE THE PROPERTY.

FAILURE TO DO SO COULD RESULT IN ADDITIONAL CHARGES BEING ADDED TO THE ACCOUNT.

Date of Application: _____

Requested Start Date: _____

Business Name: _____ TAX ID#: _____

As it will be listed on the Account - PLEASE PRINT LEGIBLY

Social Security

Responsible Party(1): _____ No: _____

DOB: _____ Driver's Lic # and State of Issuance: _____

Social Security

Responsible Party(2): _____ No: _____

DOB: _____ Driver's Lic # and State of Issuance: _____

CONTACT TELEPHONE #S: BUSINESS _____ BUSINESS FAX: _____

RESPONSIBLE PARTY'S

HOME: _____ CELL: _____ OTHER: _____

Service Address: _____

Mailing Address: _____

Email Address: _____

If Renting (Landlord): _____ Phone # (Landlord) _____

NAMES OF INDIVIDUAL(S) AUTHORIZED TO REQUEST INFORMATION ONLY ON THE COMPANY'S BEHALF:

REQUIRED DOCUMENTATION TO INCLUDE WITH APPLICATION:

1. Copy of Corporation Resolution or Articles of Incorporation (if applicable)
2. Copy of the Customer's Government Issued Current Valid Photo Identification (example: Driver's License)
3. Copy of the Customer's Lease or Ownership Papers showing date of occupancy at the Service Address.

PLEASE READ AND ACCEPT BY SIGNING BELOW: I hereby accept full responsibility for this account, and am aware that I am fully responsible for any amounts due on said account effective this date and until such time as I close the account or until the account is transferred to another entity.

BY SIGNING BELOW, I CERTIFY THAT THIS BUSINESS (ENTITY) DOES NOT HAVE ANY OUTSTANDING BALANCES DUE TO ENTERPRISE WATER WORKS.

I give my permission for my name and address to be given out on a new customer list. Yes _____ No _____

****If water cannot be left on the first attempt, there will be a \$15.00 Service Charge for every trip thereafter. If water is running and no one is home, water will not be left on.**

Signature: _____ Date: _____

Signature: _____ Date: _____

(For Office Use Only) Processed by: _____ Date Completed: _____

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CID#: _____ ACCOUNT #: _____ CYCLE#: _____

THE CITY OF ENTERPRISE WATER WORKS – APPLICATION FOR NEW ACCOUNT – BUSINESS/COMMERCIAL/INDUSTRIAL (PAGE #2)

PO Box 311000, ENTERPRISE, AL 36331-1000

PHONE: 334-347-1211 FAX: 334-348-2613

www.cityofenterprise.net

DECLARATION AND VERIFICATION OF CITIZENSHIP OR AUTHORIZED ALIEN STATUS
(FOR RESPONSIBLE PARTY(S) TO SIGN)

As per the provisions of the State of Alabama Act 2011-35, the Beason-Hammon Taxpayer and Citizen Protection Act, I hereby declare that I am:

_____ A Citizen of the United States. _____ An Alien lawfully present in the United States.

Printed Name: _____

Signature: _____ Date Signed: _____

_____ A Citizen of the United States. _____ An Alien lawfully present in the United States.

Printed Name: _____

Signature: _____ Date Signed: _____

OFFICE USE ONLY:

All Information in this application verified by: _____

Save Program Verification (if applicable): _____

Date Verified: _____

Supervisory Approval: _____ Date: _____

THIS PAGE MUST ACCOMPANY PAGE ONE OF THE APPLICATION

(For Office Use Only) Processed by: _____ Date Completed: _____

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CID#: _____ ACCOUNT #: _____ CYCLE#: _____

EXPRESS PRIOR CONSENT TO CONTACT CONSUMER BY CELL PHONE

You agree, in order for us to service your account or to collect monies you may owe, City of Enterprise Water Works Board and / or our agents, may contact you by telephone at any telephone number associated with your account, including wireless telephone numbers, which could result in charges to you. We may also contact you by sending text messages or emails, using any email address you provide to use. Methods of contact may include using pre-recorded / artificial voice messages and/or use of automatic dialing devices, as applicable.

I/We have read this disclosure and agree that the City of Enterprise Water Works Board, its employees and/or agents may contact me/us as described above.

AGREEMENT TO PAY

I, the undersigned, accept the fee charged as a legal and lawful debt and agree to pay said fee, including any/all costs of collection, (33 1/3%), attorney fees and/or court costs, if such be necessary. I waive now and forever my right of exemption under the laws of the constitution of the State of Alabama and any other State.

Responsible Party Signature

Date

Responsible Party Signature

Date

THIS PAGE MUST ACCOMPANY PAGE ONE OF THE APPLICATION

(For Office Use Only) Processed by: _____ Date Completed: _____
9/23/2013 10:51 AM