REQUEST TO RECONNECT SERVICES

ENTERPRISE WATER WORKS PO Box 311000, ENTERPRISE, AL 36331-1000 PHONE: 334-347-1211 FAX: 334-348-2613

www.cityofenterprise.net

A NON-REFUNDABLE \$35 RECONNECT FEE IS REQUIRED AT THE TIME OF APPLICATION

Requested Reconnect			
Date::			
Name:			
(as it is shown on the account)			
Person Submitting Request:			
Current Service Address:			
Mailing Address:			
Customer SSN#:	DOB:		
Driver's License Number	State of:	Expiratio	on:
Email Address:			
Contact Telephone #: Home	Work	Cell	
Amount paid to reconnect:	🗆	Tag fee 🛛 Reconnect fee	After hours fee
REQUIRED DOCUMENTATION TO INCLU	DE WITH ΔΡΡΙ ΙCΔΤΙΟΝ·		
		Identification (example: Driver's Licer	nse)
PLEASE READ AND ACCEPT BY SIGNIN	G BELOW: I hereby accept ful	I responsibility for this account, and a	m aware that I am fully
responsible for any amounts due on said acc			
transferred to another individual.			
**If water cannot be left on the first attempt,	there will be a \$15.00 Service (Charge for every trip thereafter. If wat	ter is running and no one
is home, water will not be left on.			
Customer Signature		Date Requeste	ed
11/15/2013 10:27 AM			
(For Office Use Only) Processed by	y:	Date:	
(For Office Use Only) Work Order	/Ref#:		

EXPRESS PRIOR CONSENT TO CONTACT CONSUMER BY CELL PHONE (Page #3)

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 (1)	Date
Responsible Party Signature (2)	Date
Responsible Party Signature (3)	Date
THIS PAGE MUST ACCOMPANY PAGE	ONE OF THE RECONNECT FO

11/15/2013 10:27 AM (For Office Use Only)		 _Date:
(For Office Use Only)	Work Order/Ref#:	