

Lewisburg Water Association

water application and user agreement

P.O. BOX 1309 | 2787 HWY 305 OLIVE BRANCH, MS 38654
OFFICE 662-895-6022 AFTER HOURS 833-403-2119
PAY BY PHONE 662-291-7405 REQUEST TO DIG 811
email LEWISBURGWATER@aol.com
WEBSITE LEWISBURGWATERASSOCIATION.COM

RESIDENTIAL CUSTOMER

FIRST/M.I./LAST Name

SSN (REQUIRED TO ACCEPT CHECKS)

EMPLOYER

PHONE

EMAIL

CO-APPLICANT

PHONE



SCAN QR CODE TO SET
UP ONLINE ACCOUNT
AND RECEIVE TEXT ALERTS

COMMERCIAL CUSTOMER

NAME OF BUSINESS

TIN

CONTACT PERSON

PHONE

EMAIL

SERVICE INFORMATION

SERVICE ADDRESS

CITY

STATE

ZIP

LOT #

SUBDIVISION

NUMBER OF PEOPLE LIVING IN HOME

MAILING ADDRESS (IF DIFFERENT THAN SERVICE)

CITY

STATE

ZIP

BILLING

HOW WOULD YOU LIKE TO RECEIVE YOUR STATEMENTS? PAPER BILL ☐ E-BILL ☐ BOTH ☐

WOULD YOU LIKE TO SIGN UP FOR AUTO DRAFT? OPTION ONE | BANK DRAFT ☐ OPTION TWO | CREDIT CARD ☐ | DRAFT DATE IS THE 20TH |

BANK DRAFT : BANK NAME

ROUTING #

ACCOUNT #

CREDIT CARD : CARD #

EXPIRATION

CVV

FEES

MEMBERSHIP FEE

REFUNDABLE UPON ACCOUNT CLOSURE, PAYMENT LESS ANY OUTSTANDING BALANCE.

HOMEOWNER \$ 50.00

RENTER \$150.00

CONTRACTOR \$100.00

BUSINESS \$100.00

TAP FEE - NEW CONSTRUCTION ONLY

TAP FEES ARE CHARGED PER CONNECTION AND ARE NON-REFUNDABLE.

MUST BE MADE IN ADVANCE OF ANY WORK PERFORMED BY THE ASSOCIATION

RESIDENTIAL 1 INCH SERVICE \$1,400.00

COMMERCIAL 1 INCH SERVICE \$1,400.00 + (7% TAX) \$98.00 = \$1,498.00

THE UNDERSIGNED REQUEST LEWISBURG WATER ASSOCIATION TO SUPPLY WATER SERVICE AT THIS LOCATION, AND AGREES TO RECEIVE AND PAY FOR SUCH SERVICE RENDERED ACCORDING TO THE RATES OF LEWISBURG WATER ASSOCIATION. THE UNDERSIGNED AGREES TO ABIDE BY AND BE SUBJECT TO THE RULES AND REGULATIONS OF LEWISBURG WATER ASSOCIATION RELATING TO THE SERVICES RENDERED PURSUANT TO THIS CONTRACT. THE UNDERSIGNED AGREES TO ALLOW LEWISBURG WATER ASSOCIATION AND/OR ITS AUTHORIZED AGENTS ENTRANCE ONTO ABOVE MOTIONED PROPERTY TO READ METER, MINTING, AND IMPROVING SYSTEM AND ANY OTHER ACTIVITY CONCERNING THE OPERATION OF THE SYSTEM.

SIGNATURE

DATE

CO-APPLICANT

DATE

MEMBERSHIP FEE

CASH

TAP FEE

CHECK #

TAX

CREDIT CARD

TOTAL

ACKNOWLEDGEMENT OF PAYMENT

| FOR OFFICE USE ONLY | METER #

REGISTER #

LATITUDE

LONGITUDE