## #

## RURAL WATER DISTRICT NO. 2, OKFUSKEE COUNTY

## APPLICATION FOR WATER SERVICE

PLEASE PRINT CLEARLY

		Date:	
Name(s) to be on account:			
Address Information:			
Billing Address:			
City:	State:	Zip:	
Physical Address:			
City:	State:	Zip:	
Legal Description (Required if propert	y has no physical addres	ss):	
Contact Information:			
Contact Name(s):			
Home:	Work:		
Cell #1:	Cell #2:		
Cell #1 Name:	Cell #2 Name:		
Email:	Preferred method of contact:		
Add me to Alert System:	Add m	ne to Ebills:	
Cellular #(s) for Text:	Email:		
Cellular Provider:			
Email:			

City:	State:	Zip:
Phone:		
	vice for a structure or will it belie one) <b>Structure / Pasture</b>	•
<i>If <u>Pasture tap</u></i> : Do y	ou plan on connecting to a some (circle one) Yes / No	structure in the future?
<i>If No</i> : You wil	ll need to fill out a Pasture T	ap Agreement
	ut a Pasture Tap Agreemen proval <u>before</u> it is connected	t and provide this office with a I to the structure.
	ved septic system is required e a state approved septic sy (circle one) Yes / No	d before water service can be stem in place at this time?
	•	to <b>ANY</b> structure until I provide guideline will result in meter
Signature(s):		

Do you own the property? (Circle one) Yes / No