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# CITY OF AUSTELL

2716 Broad Street • Austell, Georgia 30106 • (770) 944-4300

## UTILITY SERVICE APPLICATION

### APPLICATIONS WILL NOT BE ACCEPTED, OR WATER TURNED ON, WITHOUT THE FOLLOWING INFORMATION:

- \$75.00 deposit** – Deposit charge will be refunded if you can provide two letters of credit with a two year history from other utility companies within two weeks. If a deposit has been paid, your deposit will be returned at the end of twenty-four months, if no late or service charges have been applied to the account. Your request must be in writing.
- Picture identification** - This must be the person in which the account will be in. Two forms of identification are required.
- Rental or lease agreement** – If you do not own the property where service will be established, a copy of the rental or lease agreement must accompany this application. Proof of ownership will be required. A completed Landlord Agreement Application will also be required.

There must be someone present at the time the water is turned on. You will receive same day service until 2:00 PM.

APPLICANT NAME		
SERVICE ADDRESS		
MAILING ADDRESS (if different from above)		
CITY	STATE	ZIP CODE
TELEPHONE NUMBER ( )	CELLULAR TELEPHONE NUMBER ( )	SOCIAL SECURITY NUMBER
DRIVERS LICENSE NUMBER		DATE OF BIRTH
HAVE YOU PREVIOUSLY HAD SERVICE WITH THE CITY OF AUSTELL? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE LIST ADDRESS:		
APPLICANT EMPLOYER NAME		EMPLOYERS TELEPHONE NUMBER ( )
SPOUSES NAME	SOCIAL SECURITY NUMBER	SPOUSES CELLULAR TELEPHONE NUMBER ( )
SPOUSES EMPLOYER NAME		EMPLOYERS TELEPHONE NUMBER ( )
<b>NEAREST RELATIVE – NOT LIVING WITH YOU</b>		
NAME	TELEPHONE NUMBER	RELATIONSHIP

All water bills are due and payable by the 15th of each month. If the bill is not paid by this date, an automatic 10% late charge will be added to the past due balance and the total bill amount becomes due the first day of the month following billing date. Applicant is responsible for all charges until applicant has requested service to be terminated in his/her name. If a past due amount is shown on the bill, the full amount due must be paid or service will be discontinued without further notice. Additional charges will apply for restoration of service and any other costs incurred in settling your account. Failure to receive a bill does not entitle delayed payment. There will be a \$25.00 charge for all checks returned due to insufficient funds or closed accounts.

I understand, and hereby agree to the following: (1) falsification of any of the above information may result in immediate disconnection of service without notice; (2) failure to pay account in accordance with the City of Austell's policies will result in disconnection of service; (3) failure to pay final bill will result in account being submitted to collections. I will, as a result, be responsible for all late charges, interest and collection costs, including reasonable attorneys fees; (4) no one living in my household has an outstanding balance owing the City of Austell; and (5) water is temporarily connected until records have been verified and approved.

SIGNATURE	DATE
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ACCOUNT NUMBER

CITY OF AUSTELL  
2716 Broad Street, SW  
Austell, Georgia 30106

**LANDLORD AGREEMENT APPLICATION**

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

Service Address: \_\_\_\_\_

As landlord (owner, manager, or rental agent) for rental units located at the service address listed above, I/we, \_\_\_\_\_, request that the City of Austell provide water and/or sewer services on a continuous basis to rental units not occupied by tenants. \_\_\_\_\_ will be responsible for and will pay for water and/or sewer services at unoccupied rental units until service is placed in a new tenant's name. Bills for water and/or sewer services are to be address as follows:

Attention to: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additionally, in accordance with the City of Austell Code of Ordinances, Section 14-34 states *that landlords and agents controlling property for domestic use or rooms for lodging purposes, or offices, shall be liable for the cost of water and/or sewer services, and shall in every case give written notice to the City of Austell of the removal of the tenant or non-use of the water, and shall continue to be liable for all money due on said account. (Code 1976, § 6-2013)*

Either party may cancel this agreement upon a 30 day written notice to the other party.

\_\_\_\_\_  
Landlord/Owner Signature

\_\_\_\_\_  
Date

Home Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone Number: (\_\_\_\_\_) \_\_\_\_\_

Office Address (If Applicable): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone Number: (\_\_\_\_\_) \_\_\_\_\_

**FORM SHOULD BE TYPED OR PRINTED. IF THERE IS MORE THAN ONE ADDRESS, PLEASE ATTACH A LIST OF EACH INDIVIDUAL ADDRESS TO BE PLACED ON THE LANDLORD AGREEMENT.**

**REQUESTS FOR DELETIONS OR ADDITIONS TO THE LANDLORD AGREEMENT MUST BE SUBMITTED IN WRITING.**

**A DISCONNECT NOTICE DOES NOT CONSTITUTE A REQUEST TO DELETE A PROPERTY FROM THE LANDLORD AGREEMENT.**

FOR CITY OF AUSTELL USE ONLY			
Date Received	Approved? <input type="checkbox"/> Yes <input type="checkbox"/> No	Comments:	Approval/Denial Signature:
Received By			