

# LUMBERTON MUNICIPAL UTILITY DISTRICT

## SERVICE APPLICATION & AGREEMENT

NAME \_\_\_\_\_ ACCT # \_\_\_\_\_  
(SELF & SPOUSE'S FULL NAME) LOC # \_\_\_\_\_

MARITAL STATUS M, S, W, D \_\_\_\_\_

HIS SOCIAL SECURITY NO. \_\_\_\_\_ HER SOCIAL SECURITY NO. \_\_\_\_\_

HIS DRIVERS LICENSE NO. \_\_\_\_\_ HER DRIVERS LICENSE NO. \_\_\_\_\_

Owner: \_\_\_\_\_ Renter: \_\_\_\_\_

Email address: \_\_\_\_\_

SERVICE LOCATION \_\_\_\_\_ MAILING ADDRESS \_\_\_\_\_

HOME PHONE NO. \_\_\_\_\_

CELL PHONE NO. \_\_\_\_\_

HIS EMPLOYER & ADDRESS: \_\_\_\_\_ HER EMPLOYER & ADDRESS: \_\_\_\_\_

JOB TITLE \_\_\_\_\_ JOB TITLE \_\_\_\_\_

PHONE NO. \_\_\_\_\_ PHONE NO. \_\_\_\_\_

LOCAL FRIEND OR RELATIVE:

NAME: \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

PHONE NO. \_\_\_\_\_

I HAVE RECEIVED A COPY OF THE DISTRICT POLICY AND AGREE TO ABIDE BY THEM, I UNDERSTAND MY SERVICE WILL BE DISCONNECTED IF I FAIL TO DO SO.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

I AGREE TO ALLOW LMUD TO RELEASE MY NAME AND ADDRESS TO OPEN RECORDS REQUEST (IE, CHURCH, CIVIC GROUPS, WELCOMING COMMITTEES) YES \_\_\_ NO \_\_\_

**OFFICE USE ONLY**

DEPOSIT: \$ \_\_\_\_\_  
NEW CUST FEE: \$ \_\_\_\_\_  
PERMIT FEE: \$ \_\_\_\_\_  
W/TAP: \$ \_\_\_\_\_  
W/TIE-IN: \$ \_\_\_\_\_  
LPSS: \$ \_\_\_\_\_  
S/TAP: \$ \_\_\_\_\_  
S/TIE-IN: \$ \_\_\_\_\_  
OTHER: \$ \_\_\_\_\_  
**TOTAL PAID** \$ \_\_\_\_\_

METER # \_\_\_\_\_

READING \_\_\_\_\_