

LADD WATER USERS ASSOC., INC.
705 HWY 425
PINE BLUFF, AR 71601
(870) 534-0684

CUSTOMER INFORMATION FORM
(PLEASE PRINT CLEARLY)

DATE _____

ACCT. # _____

FULL NAME _____

NICK NAME _____

MAILING ADDRESS _____

PHYSICAL ADDRESS _____

CITY, STATE, ZIP CODE _____

HOME PHONE _____ MESSAGE PHONE _____

SSN _____ DATE OF BIRTH _____

PLACE OF EMPLOYMENT _____

EMPLOYMENT ADDRESS _____

EMPLOYMENT PHONE _____

SPOUSE FULL NAME _____

SPOUSE SSN _____ DATE OF BIRTH _____

SPOUSE EMPLOYMENT _____

SPOUSE EMPLOYMENT PHONE _____

NEAREST RELATIVE NOT LIVING WITH YOU _____

PHONE _____

NEAREST FRIEND _____ PHONE _____

PREVIOUS ADDRESS _____

LAST WATER UTILITY A CUSTOMER WITH _____

BANK _____

WATER USERS AGREEMENT

I, _____ HEREBY MAKE APPLICATION TO THE LADD WATER USERS ASSOCIATION, INC., FOR WATER SERVICE AT THE FOLLOWING LOCATION:

LOCATION: _____

OWNER OF PROPERTY: _____

TENANT: _____

IN CONSIDERATION OF THE COMPANY'S UNDERTAKING THE CONNECTION OF ITS WATER WORKS SYSTEM TO MY SERVICE LINE, I AGREE TO THE FOLLOWING CONDITIONS:

(1) TO INSTALL AND MAINTAIN AT MY EXPENSE AT EACH METER LOCATION THE NECESSARY SERVICE LINE TO CAUSE THE PROPERTY DESCRIBED ABOVE, WHICH IS OWNED OR OCCUPIED BY ME, TO BE CONNECTED WITH THE WATERWORKS SYSTEM.

(2) I AGREE THIS WATER SERVICE WILL BE USED FOR THE PURPOSE OF SERVING (1) RESIDENCE. IF MORE THAN ONE RESIDENCE IS CONNECTED TO THIS SERVICE, SERVICE WILL BE DISCONNECTED AND A DISCONNECTION FEE WILL BE CHARGED TO RESTORE SERVICE AT THE ORIGINAL RESIDENCE WHEN MULTIPLE RESIDENCES ARE SERVED FROM SERVICE.

INITIAL _____

(3) TO USE THE WATER IN ACCORDANCE WITH RULES AND REGULATIONS AS ESTABLISHED BY THE COMPANY AND THE ARKANSAS DEPARTMENT OF HEALTH, AND TO PROMPTLY PAY FOR THE WATER AT THE APPLICABLE SCHEDULE OF RATES.

(4) TO PAY A NON-REFUNDABLE CONNECTION CHARGE OR TAPPING FEE AT EACH METER LOCATION OF \$ 350.00 OR APPROPRIATE FEES FOR EXTENSIONS OR ROAD CROSSINGS PRIOR TO CONNECTION OF THE SYSTEM TO MY SERVICE LINE AND A DEPOSIT, SAID DEPOSIT BEING REFUNDABLE ACCORDANCE WITH THE RULES AND REGULATIONS OF THE COMPANY.

LADD WATER USERS ASSOC., INC.

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(381) \$ _____ RENTAL PROPERTY DEPOSIT
(42410) \$ _____ MEMBERSHIP FEE
(506) \$ _____ METER SET
\$ _____ **TOTAL**

CUSTOMER SIGNATURE _____

(1) I / WE AGREE TO PAY THE MINIMUM WATER BILL EACH MONTH OR THE APPROPRIATE AMOUNT FOR WATER CONSUMED IN A BILLING PERIOD. FAILURE TO PAY THE MINIMUM BILL OR CURRENT BILLING AMOUNT WILL RESULT IN DISCONNECTION AFTER THE 20TH OF EACH MONTH. IN THE CASE A DISCONNECT IS DECLARED BY THE ASSOCIATION, ALL DEPOSITS AND PAYMENTS WILL BE FORFEITED. A RECONNECT CHARGE FEE AS REQUIRED BY THE ASSOCIATION WILL BE CHARGED WHEN SERVICE IS AGAIN REQUESTED.

(2) TO DISCONNECT ALL PRIVATELY OWNED WATER SUPPLY SOURCES FOR MY RESIDENCE, OTHER POINT OF USE, AND USE WATER PROVIDED BY THE ASSOCIATION IN ACCORDANCE WITH RULES AND REGULATION OF THE LADD WATER USERS ASSOCIATION, INC. AND THE ARKANSAS STATE HEALTH DEPARTMENT, AND TO PROMPTLY PAY FOR WATER SERVICE AT THE APPLICABLE SCHEDULE OF RATES.

IN WITNESS WHEREOF I HEREUNTO SET MY HAND AND OFFICIAL SEAL.

ATTEST:

OFFICE MANAGER LADD WATER USERS

MANAGER-OPERATOR LADD WATER USERS

OFFICE PERSONNEL LADD WATER USERS