

City of Friendswood
Application for Utility Service

Service Start Date: _____ (no holidays or weekends)

Request Recycling Bin: yes ___ no ___ **OR** Recycling Cart: yes ___ no ___ (\$1.10 monthly fee)

Previous address in Friendswood: _____

Name of Applicant: _____

Name of Person(s) who may make inquiries/payments on my utility account: _____

Service Address: _____

Mailing Address: _____
(If different from services address) (Include street, city, state, zip)

E-mail Address: _____

Primary Phone Number ____ - ____ - ____ Alternate Phone Number ____ - ____ - ____

Social Security Number ____ / ____ / ____ Date of Birth _____

Driver's License Number: _____ State: _____

Own Home _____ Rent _____ Name of Landlord _____

House Bill 859 (Open Records Act) gives you the right to request that your personal information, (address, telephone number and social security number) not be made available to the public. You may exercise this right by indicating below.

I request that my personal information be kept confidential: Yes _____ No _____

DEPOSIT:

Homeowner \$100.00 Tenant \$200.00 Management Co/Leasing Agents \$250.00

I understand that the City will begin water service by making a physical connection located at the meter outside the building or buildings to be served. I understand that the City will not have access to any building served and will not determine if there are any open faucets or water system leaks inside the building. If there are any open faucets or water system leaks that cause damage to the property, I agree not to hold the City responsible for any damages arising there from.

Pursuant to the FTC Red Flag Policy, Implementing Section 114 Fair and Accurate Transactions Act of 2003, the following documents must be submitted to our office: Applicant must provide legible copy of valid Driver's License or legal photo identification card at time of application. Applicant must provide current proof of property ownership or lease agreement within 3 business days of application submission to avoid utility service interruption and possible fees.

_____ documents submitted _____ to submit documents within 3 business days

I, the undersigned, fully understand that I am liable for any water, sewer and refuse charges incurred at the service address referenced above. I also understand that if the bill is not paid by the due date, a 10% administrative fee will be charged.

Applicant's Signature

Date of Application

For Office Use Only		
Deposit Amount: _____	Letter of Credit: _____	Deposit Transferred: _____
Account Number: _____	Start Date: _____	
Processed by: _____	Date: _____	