CITY OF MISSION HILL CONNECT SERVICE ORDER/AGREEMENT

I, the undersigned, do hereby make Application to the City of Mission Hill Utility Department for services at the address stated below and commencing on the date shown below and AGREE to pay for said services as Bills are rendered. Therefore, in accordance with the rates, rules, and regulations as Prescribed by the Board of Trustees of Mission Hill and in effect at the time of deliver.

SIGNATURE:	
DATE:	
PHONE NUMBER:	
DATE OF B IRTH:	
SOCIAL SECURITY NUMBER:	
PRINTED NAME: (NAME ON AC	
(NAME ON AC	COUNT)
MAILING ADDRESS:	
	SERVICE ORDER
I request water to be turned on at	
	(address)
On	·
(date)	
\$125.00 water deposit received	YES NO
Copy made of identification	YES NO
(must be either a drivers license or so	
Water will be turned on between 8:00	0 0 % ME 1 '4' ' 1
	U a.m. & 5 p.m. M-F once deposit is received
-	to set up connection time. Connection after