

TOWN OF FELSENTHAL

1000 SOUTH 3RD STREET

Felsenthal Ar. 71747

Phone: 870-943-2454 FAX: 870-943-2447

(PLEASE NOTE THAT IF YOUR HOME IS A NEW DEVELOPMENT IN OUR COMMUNITY, YOU MUST FILL OUT A FLOODPLAIN DEVELOPMENT PERMIT APPLICATION, ALSO AVAILABLE ONLINE).

WATER/SEWER USER AGREEMENT--NEW SERVICE

(revised, June, 2016)

I, _____ hereby make application to the Sewer & Water Commission Of the Town of Felsenthal (hereafter called Company) for membership in the Company and for Water & Sewer service at the following location: _____

Address

_____. The legal description of which is: Block _____,

City

Lot _____ in the Town of Felsenthal.

In consideration of the Company's undertaking the financing and construction of a water & sewer system, I agree:

- To install and maintain at my expense the necessary service line from the sewer main to the Property described above, which is owned or occupied by me
- A non-refundable tapping fee of \$100.00 must be paid at the time of application before the start of construction for these utilities
- To discharge the sewer in accordance with rules and regulations to be established by the Company and to promptly pay for the sewer at the applicable schedule of rates.
- A Non-refundable fee of \$400.00 for water must be paid at the time of application before the start of construction for these utilities
- To receive water in accordance with the rules and regulations to be established by the company and to promptly pay for the water at the application schedule of rate.
- All meters installed are to remain on the property if sold. NEVER TURN WATER OFF OR ON AT THE METER. The meter belongs to the Town of Felsenthal and should not be tampered with by the resident
- There will be a refundable deposit of \$75.00 (\$35.00 for water and \$40.00 for sewer) in accordance with the rules and regulations of the Company. Renters will pay a deposit of \$100 (\$60 for water and \$40.00 for sewer)
- Water & Sewer are billed on the same card and are due by the 15th of each month.

All rules and regulation of the Arkansas Department of Health will be followed.

It is further understood that if, for any reason, the Company is unable to provide me with the sewer service anticipated, the full amount of my deposit shall be refunded to me.

\$ _____ Deposit Sewer & Water
 \$ _____ Tapping Fee Sewer
 \$ _____ Meter Installation Fee Water

Received (Date) _____

By _____

Cash _____ Check _____

Phone number _____

Alternate number _____

Mailing Address: _____

Type of Service: Residential _____

Other _____

EMAIL address: _____

Signature--Property Owner

On reverse of this page, print legibly the full name and SS# of each person 18 years or older who will be residing at this address.