

Date _____

**The Water Works Board of the Town of Ragland
220 Fredia St. Ste 101, Ragland AL 35131**

Water Application

Name _____		Mailing address if different (P.O. Box, etc.) _____	
Phy. Address: _____		Spouse: _____	
Phone #: _____		Place of Employ _____	
Place of Employ _____		Phone # _____	
Phone # _____		_____	
S.S. # or Drivers Lic. _____		S.S. # or Drivers Lic. _____	
Do you own your home <input type="checkbox"/> Rent <input type="checkbox"/> Modular Home <input type="checkbox"/> Mobile <input type="checkbox"/>		_____	
Amount of Deposit _____		Name & No. Nearest Living Relative: _____	
Tap Required: Yes <input type="checkbox"/> No <input type="checkbox"/>		_____	
Tapping Fee Amount: \$ _____		_____	

I/We will be responsible for all services furnished by the Ragland Water Works Board until I have had services discontinued. If I fail to pay any overdue amounts, I hereby waive all exemptions under the Constitution of the State of Alabama and agree to pay a reasonable cost of collection including attorney's fees and cost of court. I acknowledge that services will be discontinued for non-payment. Both parties shall be responsible for any and all debts incurred.

_____ Date _____
Responsible Party

_____ Date _____
Spouse or Domestic Partner

Both Parties signatures required unless single occupancy