



Customer Deposit Information

WATER DEPOSITS ARE REFUNDABLE UPON CLOSURE OF ACCOUNT AND THE FINAL BILL PAID.

P.O. Box337
12148 15th St.
Santa Fe, TX 77510
(409) 925-2821

Your final bill will be deducted from your water deposit and the reminder sent to you.

TYPE OF SERVICE: <input type="checkbox"/> WATER <input type="checkbox"/> SEWER <input type="checkbox"/> OD		SERVICE START DATE: / /	
Previous Address:			
Name of Applicant:			
Service Address:			
Mailing Address:			
Home Phone:		E-Mail Address:	
Own Home:	Rent:	Name of Landlord:	
Persons in household:	Pool: <input type="checkbox"/> Yes <input type="checkbox"/> No	Irrigation System: <input type="checkbox"/> Yes <input type="checkbox"/> No	Flood Zone: <input type="checkbox"/> Yes <input type="checkbox"/> No
Place of employment:			Work Phone:
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 wthe public. You may exercise this right by signing below:			
Signature:			
Reference / Address / Phone Number:			
I, the undersigned, fully understand that I am liable for any water, sewer, tax or AC charges incurred at the service address referenced above.			
Signature:			Date:

Applicants <u>must</u> provide Driver's License or legal photo identification card.			
Driver's License No. :		Social Security Number:	
Deposit Amount: <input type="checkbox"/> Cash <input type="checkbox"/> Check		Deposit Receipt No. :	
Account No. :		Meter No. :	
Deposit No. :	Processed by:		Date: