



City of Forney
Water/Sewer Service Application Request
 ALLOW 24 HOUR NOTICE TO IMPLEMENT REQUEST

(972) 564-7304
 (972) 552-1028 FAX
 ubquestions@cityofforney.org

Connection Disconnect (Must be on acct) Temporary Service

Today's Date	Effective Date	Service Address	
Billing Name		Billing/Forwarding Address	
Property Owner's Name		Account # (Existing ONLY)	<input type="checkbox"/> Rent <input type="checkbox"/> Own

RESIDENTIAL SERVICE ONLY \$100(\$75 Refundable Deposit+\$25 Application Fee)Required/Temporary Service \$38.50 non-refundable

Home/Cell Phone	Work Phone	Date of Birth
Drivers License Number/State	Social Security Number	# of People in Household
Email Address		Employer's Name
Co-Applicant	Home/Cell Phone	Work Phone
Drivers License Number/State	Social Security Number	Date of Birth
Email Address		Employer's Name

Have you ever had service in Forney? No Yes If yes, location(s) _____

COMMERCIAL SERVICE ONLY \$300(\$275 Refundable Deposit+\$25 Application Fee)Required

Business Name		Applicant's Name & Title	
Type of Business	Billing Contact	Phone Number	Fax Number
Contact Email Address		Tax ID/Social Security Number	

Garbage: Commercial accounts are required to set up and pay for garbage service with CWD. CWD will be notified of the activation of your account. Non-payment of your utility account can result in disruption of your water service.

*Temporary Service: A maximum of 14 days and 2,000 gallons of usage. Usage of 2,001 gallons and over (per thousand gallons) has an additional charge.

I certify that I am at least 18 years of age and I hereby apply for services at the above address, to be furnished at the standard rates and under the terms and conditions of the City, on file in the the City Office. The above deposit amount will be held until applicant discontinues water service or Residential account has 36 continuous months of no penalties. I acknowledge water service will be turned on at the above property. I will not hold the City of Forney responsible for any property damage due to the water being turned on without my presence. I acknowledge if the meter shows water usage, it will be turned back off and my presence will be required for connection of service. **A copy of the driver's license, state issued or military ID must be provided before services can begin.**

Signature of Applicant: _____ Signature of Co-Applicant: _____

Confidential Request Form

I hereby do request that the utility record information as authorized by chapter 182 of the Texas Utilities Code be kept confidential.

Signature of Applicant: _____

OFFICE USE ONLY

Start Date	Date Paid	Amount Paid	Previous Service <input type="checkbox"/> Yes <input type="checkbox"/> No
Cash	Check #	Credit Card	Completed By
			Account #