

City of Barwick

P.O. Box 146
2090 Cedar Street
Barwick, GA 31720

Incorporated 1903

CUSTOMER SERVICE APPLICATION

Please remit the following documentation either in person, by mail or fax:

- Customer Service Application
- A copy of your closing papers, insurance binder, contract, lease agreement, etc.
- A copy of a Photo ID

Name _____

Service Address _____

Mailing Address _____

Social Security # _____ DL# _____

Telephone # _____

Employer _____ Telephone # _____
Name (printed)

Customer Type Owner, Renter or Realtor
(Please circle one)

Initiation Date _____ Deposit Paid _____ Deposit Pd Date _____

Set Up Fee Paid _____

**Minimum \$300.00 deposit is required for all accounts.
15.00 Set-up Fee**

TERMS AND CONDITIONS

I confirm the customer's name, service address and mailing address on this application are correct. The City will not be liable for any damage that may occur due to the connection of service. I understand that I am responsible for payment of the utility services at this location until I complete a disconnect order request. I also understand that bills for the above utility services are rendered monthly and that failure to make payment for utility services by the 10th day following the bill date will result in disconnection of services without further notice and will also result in delinquent service charges. If my services are delinquent, the entire outstanding amount on my account, including service charges, must be paid in full to reinstate my utility service and additional deposit of \$300.00. Tampering with the meter will result in penalties determined by general law. I agree to abide by City ordinances with respect to utility services.

Signature _____

Date _____

Telephone (229) 735-2311 Fax (229) 735-4151 Email cityofbarwick@windstream.net