



11821 W Picture Rocks Rd
Tucson, AZ 85743
Phone: 520-682-7331 Fax: 520-682-8933

RESIDENTIAL WATER SERVICE AGREEMENT AND APPLICATION

Name: _____ Phone: (hm) _____

SSN: _____ Phone: (wk) _____

Driver's License #: _____ Cell Phone: _____

Email: _____

Applicant's Employer: _____

Spouse/Partner: _____ SSN: _____

Service Address: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Living Relative: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Date Service to Begin: _____ Initials: _____

I, the undersigned, hereby agree that, in the event of default in the payment of any amount due, and if this account is placed in the hands of a collections agency or Attorney for collection or legal action, to pay an additional charge equal to the cost of collection including Collection Agency or Attorney fees and court costs.

SECURITY DEPOSIT IS REFUNDABLE AFTER ONE YEAR OF ON TIME PAYMENTS OR ON THE FINAL BILL; THE DEPOSIT WILL BE CREDITED TO YOUR AVRA WATER ACCOUNT.

BY RECEIVING WATER FROM AVRA WATER CO-OP YOU WILL BE CONSIDERED A MEMBER WITH ALL THE BENEFITS THAT ENTAILS

Signature: _____ Date: _____

OFFICE USE ONLY

Account #: _____ Entered by: _____

Owner: _____ Renter: _____

Incomplete or incorrect forms may delay the start of your water service