

11821 W Picture Rocks Rd Tucson, AZ 85743

Phone: 520-682-7331 Email: Customerservice@avrawater.com

RESIDENTIAL WATER SERVICE AGREEMENT AND APPLICATION

Account Name:		Phone:	
Email:			Marie Control
2 nd Name (optional):			
Phone			
Service Address:			
Billing Address:			
City:	State:	Zip:	
Applicant's Employer:			
Emergency			
Contact:		Phone:	
Date Service to Begin:		Initals:	
		ount due, and if this account is placed in the hands of a collecti f collection including Collection Agency or Attorney fees and c	
SERCURITY DEPOSIT IS REFUNDABLE AFTER ONE ACCOUNT. BY RECEIVING WATER FROM AVRA W	YEAR OF ON TIME PAYMENTS OR ON TI ATER CO-OP YOU WILL BE CONSIDERED	HE FINAL BILL; THE DEPOSIT WILL BE CREDITED TO YOUR AVRA O A MEMBER WITH ALL THE BENEFITS THAT ENTAILS.	4 WATER
Signature:		Date:	***************************************
	OFFICE USE ONLY		
New Meter Installs: Water Line T	ype		***************************************
Account #:	Entered b	bγ:	
Owner: Renter:	_ Deposit Pai	d Date	

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

Avra Water Co-op, Inc. is an Equal Opportunity Provider and Employer.