

14263 Calhoun Road, Mount Vernon, WA 98273 360-466-4443

APPLICATION FOR SERVICE

Date: May 5, 2021 Applicant Name: SHIRLEY LUMIA	 -
Phone 360 333-4025 County Parcel Number: 32051900101900	
Service Address: 27915 15th AVE NE ARLINGTON, WA 98223	
Applicant's Mailing Address: 27915 15th AUE NE ARLINGTON, WH 98223	
Type of Service Requested: <u>RESIDENTIAL</u> Example: Residential, Commercial, Metered service, letter to provide service, ready to service, etc.	
The above-mentioned owner(s) understands becoming a customer of Tatoosh Water Company requires any outstanding debt due the water company be settled, in full, prior to the transfer to new property owners. The undersigned Owner acknowledges that s/he remains obligated and responsible for all associated water charges to the property located at the address stated above and, in addition that Tatoosh Water Company retains all enforcement and collection rights against the owner and the property. This application is valid for three months from the date of submission and the installation will take place within 30 days from receipt of associated charges and the signed contract.	
Customer Name: Signature:	
SHIPLEY LUMIA Date: MAY 5, 2011	
For Company Use Only:	
For Company Use Only: Company Representative: Date: 5 0 2 Date of Expiration:	
Company Representative: Date: 5 10 21	
Company Representative: Date: 5 10 2 Date Application Received: 5 0 2 Date of Expiration:	
Company Representative: Date: 5 0 2 Date of anticipated installation: Customer Account Number: FEES: Company Representative: Signature: Signature: Customer Account Number:	
Comparty Representative: Date: 5 0 2 Date of Expiration: Customer Account Number: FEES: Account Set up fee \$55.00 Date Received: 5 0 2 Check # 6 3 8 Children Signature: Signature: Customer Account Number: Check # 6 3 8 Children Signature: Date of Expiration: Customer Account Number:	