



City of Tontitown Water Utility
PO Box 127, Tontitown AR 72770
Phone: 479-361-2700
Physical Address: 201 E Henri de Tonti Blvd,
Springdale AR 72762

For Office Use Only

Account# _____
 Deposit \$ _____
 Water Tap: \$ _____
 Sewer Tap: \$ _____
 Receipt# _____

RESIDENTIAL SERVICE APPLICATION

Date: _____

Service Address: _____

Customer Name: _____

Mailing Address: _____

City & State: _____ Zip Code: _____

Driver License #: _____ State: _____ (COPY of DL REQUIRED)

****Driver's license copies are required for ALL names that will appear on the account****

E-mail Address: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____ Ext: _____

Last Water Company with which you had service: _____

Previous Address: _____ (These must not be left blank. Act 769 of 2003)

Please choose one or more of the following services:

*******Trash Day Wednesday, place trash out night before*******

We *do not* provide containers

Solid Waste Service: _____ 4 bag _____ 8 bag _____ 12 bag

Yellow Bag Program (Program offered to senior citizens, age 65 or greater.)

Recycling (*Additional cost per month*)

Sewer Service: Date Requested: _____

Water Service: Date Requested: _____

Irrigation Yes No

If yes to Irrigation, provide proof of backflow prevention device certification within 10 days of service connection.

Signature _____

Printed Name _____



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SERVICE AGREEMENT

Date _____

Service Address _____

This service agreement and deposit is to guarantee the due payment of any indebtedness for any service due Tontitown Water Utility. This deposit shall be retained in escrow, without interest, by Tontitown Water Utility. The undersigned customer also agrees to comply with all rules and regulations of Tontitown Water Utility now in effect or those that may be hereafter established by Tontitown Water Utility. When service to the above customer at the stated address is permanently discontinued, and payment of all amounts due the Tontitown Water Utility are cleared, said service deposit shall be applied to the final billing and the remainder, if any, returned to the depositor.

By Signing below:

1. I agree and understand that I must provide written notice of disconnect when I vacate the service address.
2. I agree to and accept the Tontitown Water Utilities Terms and Conditions of Service, including any updates, revisions and amendments.

Customer Signature _____

Printed Name _____