

AUBURN WATER SYSTEM, INC

3097 LOCKE LN
CRESTVIEW, FL 32536
850-682-1258 OR 850-682-3413 ~ FAX 850-398-6643



TEMPORARY WATER AGREEMENT

REPRESENTATIVE OF: _____
SELF OR NAME OF BUSINESS

BILLING ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME NUMBER _____ WORK NUMBER _____

S.S. # OR TAX ID # _____ DATE TO TURN WATER ON _____ TODAYS DATE _____

***If you are not at home when our technicians comes to turn on your water, we will unlock the water valve but leave it in the off position in the meter box. To turn it on, open the meter box and turn the handle 90 degrees. If you have any questions please call our office using the numbers above. Auburn Water System, Inc. is not responsible for any flooding.**

TEMPORARY WATER IS FOR 10 BUSINESS DAYS ONLY:

I UNDERSTAND BY SIGNING BELOW THAT THE CHARGE OF \$40.00 (OWNER OR REAL-ESTATE COMPANY) WILL NOT BE REFUNDED AND I WILL BE BILLED FOR ALL USAGE OVER 3,000 GALLONS AT THE CURRENT USAGE BLOCK RATES. WE ALSO NEED A COPY OF YOUR DRIVERS LICENCE. ALL REQUESTS ARE NEXT BUSINESS DAY SERVICE

SERVICE ADDRESS _____

PRINTED NAME OF REPRESENTATIVE (SELF OR SIGN FOR BUSINESS) _____ SIGNATURE OF REPRESENTATIVE (SELF OR SIGN FOR BUSINESS) _____

(OFFICE USE ONLY)

ACCT # _____ RT/METER # _____

DATE TURNED OFF _____ OFF/ON SERVICE ORDER # _____

METER ID # _____ METER SERIAL # _____

BEGINNING READ _____ ENDING READ _____ GALLONS USED _____

AMOUNT PAID _____ USAGE BILLING (IF ANY) _____

SIGNATURE OF CUSTOMER SERVICE REPRESENTATIVE _____ PRINTED NAME OF CUSTOMER SERVICE REPRESENTATIVE _____