

## City of Winder Residential Utility Application

## Applications accepted 9:00 AM - 4:30 PM

45 East Athens Street ,Winder,GA 30680 Phone 770-867-3106 Fax 770-307-0424 Send to:customer.service@cityofwinder.com

## A Legal Photo ID (such as a Valid Driver's License, Government Issued ID or Passport) is required to establish service.

Water Deposit Amount \$100 and/or Gas Deposit \$150 (Cash, Check, Visa or MasterCard)

A Deposit is required for all accounts before service is established. The deposit may be waived based on credit. Proof of ownership or lease agreement papers are required. The City of Winder shall attempt collections of all parties listed on lease agreement or closing papers. Any additional costs incurred during the collection process will be the responsibility of said parties.

Service will be connected within the next business day (weekends & holidays not included). A **processing fee of \$50.00** is due for all new accounts. A transfer fee of \$25 may be required if the meter at the new location has been disconnected. Application must be filled out completely, accurately & legibly in order to establish service. Any applications received after 3:00pm will be processed the **next business day**. Customers who fax applications will receive a phone call if a deposit is needed.

ast Name:First Name:			Middle/Maiden:		
Date of Birth:	Are you at least 18 years old?				
SS#:	Driver's License #:	State:Em	ıail		
Home Phone #	Cell #			Work #	
Service Address:			Ap	partment #	
City:	State:Zip:	How would you	like to receive	e your bills? Paper Bills	☐ E-Bills ☐
Mailing Address (If diff	ferent):				
City:	State:	_Zip:			
Spouse/Roommate:		Date c	of Birth:	SS#:	
Driver's License #:	State:				
Own:  Rent: F	Property Owners Name:			Phone #	
Address:	Ci	ty:		State: Zip:	
	r Service? Y N Do you need to s				
If so, when?	-		,		
		C	Nito /-	State	7in:
	<b>e</b> :		·пу	State	zıp
for service, I acknowle knowledge the above i or before 5:00 pm on listed address, I am re bills until such time as  Customers in the customes	n a City employee damages the met edge that a credit report may be orde information is correct. I certify that I at the due date to avoid penalty. Not required to contact the Winder Custome the disconnection form is completed at must insure all inside plumbing is sher's responsibility. I acknowledge if off and my presence will be required.	red to determine eligent responsible for the receiving a bill does or Center and comple and submitted.  The complete of the co	gibility or deporting account a not excuse the ete a disconner as a result inusual usage	osit requirements; I ver and that all bills must a e fees. I also understand ct form. I understand th of open faucets or lea e that is considered a	ify that to the best of my be paid and received on d that if I move out of the at I am responsible for all lks inside the building is bove normal, it may be
Signature:		Date			
For office use only:					Rev 05-17
New Account #:	Previous	Account # (If applic	able-see disc	onnect form)	
-	Y N Garbage Service Needed? - Y				
	ed byBad Debt? - Y N				
	N Date Checked Con			D-4	
	ByTurn Or By Turn Or				