

Oconee County Water Resources
PO Box 88 Watkinsville, Georgia 30677 - 706-769-3960

CONTINUOUS OWNER

Residential Service Application

PLEASE PRINT

Name: _____ *ID#: _____

Printed Name of Responsible Individual if Company Listed Above: _____

Meter Location (Street Address) _____

This address is on Septic Tank or County Sewer ** (must check one)

Billing Address (Street or PO Box) _____

City: _____ State _____ Zip _____ Telephone _____

Email: _____

FEEs

5/8" x 3/4" Meter (Availability, Installation, and Inspection fees).....\$1800.00 _____

Residential Water Service Deposit.....\$ 75.00 _____

Residential Sewer Service Deposit.....\$ 50.00 _____

Service Fee (Non-Refundable).....\$ 30.00 _____

Additional Services.....\$ TBD _____

Total Amount Paid \$ _____

Date Service to Begin: _____

- Base charge applies to each meter.
- If a mailed bill is not received, this does not relieve the customer from paying delinquent bill. Call Water Dept 769-3960.
- Non-payment in our office by the due date is subject to a \$2.00 or 10% late fee of the delinquent amount on the account.
- Water meters must be accessible at all times, and are located in the county right-of-way. Please maintain landscaping to a three-foot radius so the meter is accessible. Failure to maintain landscaping may result in cutting or removal by the Water Department.
- *If payment is not received in our office by 15 calendar days past the due date, \$40 will be added to the account and service discontinued.*
- *Failure to complete the End Landlord/Continuous Owner Agreement will result in customer being responsible for any water usage until account is closed using this form.*
- *Tampering with meter will result in a fine of \$250.00.*

I agree with all contents of this application, and will conform to all policies of Oconee County Water Resources. I also authorize service and accept responsibility for the bill at the service address listed above each time a tenant either gives final notice to us or their account is closed out for nonpayment. I understand this application is address specific so deposits cannot be transferred to another location.

Signature: _____

Date: _____

*Valid Government Issued Driver License, Passport, or Tax ID# with complete & current W-9

Department Use Only

Account Number: _____ Route Sequence # _____ Work Order # _____

All fees subject to change. All fees for meters 3" and larger are to be calculated by the Water Director. Additional fees if required:

Pursuant to Title II ADA and Section 504 of the Rehabilitation Act of 1973, as amended, no otherwise qualified individual with a disability in the United States shall, solely by reason of her or his disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance or under any program or activity conducted by Oconee County, Georgia. Additionally, pursuant to Title VI of the Civil Rights Act of 1964 and the Civil Rights Restoration Act of 1987, no person shall on the grounds of race, color, or national origin be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity conducted by Oconee County, Georgia.