

**ACCT** \_\_\_\_\_

PREVIOUS EDITIONS OF THE  
FORM ARE OBSOLETE  
FORM INITIATED:  
July 14, 2010



## Town of Bowling Green Water, Sewer, and Refuse Service Application

This application requests the Town of Bowling Green Department of Public Works to provide water service, sanitary sewerage disposal service, and refuse collection to residents of the Town of Bowling Green or water and/or sanitary sewerage disposal service to Caroline County residents with approval by the Town Council of the Town of Bowling Green. A separate account set-up fee will be charged for each utility account that is established or changed. A deposit is required for each account established in an amount set forth by the Town Council of the Town of Bowling Green. The deposit will be applied to the final bill when the account is closed and cannot be transferred to a new or different account.

### Property Information

\_\_\_\_\_

Physical Address

\_\_\_\_\_

Owner

\_\_\_\_\_

Daytime Telephone Number

\_\_\_\_\_

Mailing Address

### Applicant/Lessee

\_\_\_\_\_

Name

\_\_\_\_\_

Daytime Telephone Number

Same as owner

\_\_\_\_\_

Mailing Address

### Additional Information

Social Security Number of the Applicant (Required) \_\_\_\_\_

Water, Sewer, and Refuse Service (In Town)

Yes       No

Water and Refuse Service Only (In Town with Septic Tank)

Yes       No

Water and Sewer Service (Out of Town)

Yes       No

Water or Sewer Service Only (Out of Town)

Water       Sewer

## Certification and Agreement by Owner/Applicant

I certify that I have the authority to make the foregoing application and the information given is correct, including any attachments.

The applicant hereby applies to the Town of Bowling Green for the requested and authorized services at the applicant's address stated on this application or such other service address as designated by the applicant where the requested and authorized services are provided by the Town of Bowling Green.

The applicant agrees to pay for said water and/or sanitary sewerage disposal services at the rates now or hereafter established by the Town Council of the Town of Bowling Green as bills are rendered therefore from the date of this application until notice to the Town of Bowling Green to discontinue the service is given by the applicant. The applicant further agrees to be bound by all rules, regulations, and ordinances, now and hereafter established by the Town Council of the Town of Bowling Green, governing the regulation, use, and supply of water and/or the regulation, use, and availability of sanitary sewerage disposal services. The applicant further agrees to pay a separate account set-up fee for each utility account that is established or changed and a deposit on each account established in the amount set forth by the Town Council of the Town of Bowling Green and such deposit shall not be considered as full and final payment to close the account when service is discontinued for any reason. Any remaining balance after the deposit is applied to the final bill is the responsibility of the applicant. Any overage after the deposit is applied to the final bill will be refunded to the applicant by the Town of Bowling Green. The deposit can only be applied to the established account and cannot be transferred to a new or different account.

The applicant further agrees to release and discharge the Town of Bowling Green from any liability for any damages to the property supplied, and by which such services are furnished or delivered resulting from the bursting of any water main or service pipe, shutting off of water for repairs to extensions or connections, or the accidental failure of the water supply from any cause whatsoever. Neither shall the Town of Bowling Green be liable for any damage resulting from the restriction of sanitary sewerage flows due to sewer stoppage or any other failure of the system components such as pumping stations, manholes, or collection lines.

\_\_\_\_\_ **Date**

\_\_\_\_\_ **Owner/Applicant Signature**

### \*\* FOR TOWN USE ONLY \*\*

**Deposit**

Deposit Amount \$ _____	Last Bill Amount \$ _____
	Deposit Used - \$ _____
	Balance Due \$ _____

\_\_\_\_\_ **Date Account Paid in Full**

\_\_\_\_\_ **Date Refund Paid**