

METER SERIAL #:

INITIAL READING:

WATER RATE CODE:

CITY OF DAHLONEGA

465 Riley Road

Dahlonega, Georgia 30533 Phone: 706-482-2703 • Fax: 706-864-4837

SERVICE APPLICATION - COMMERCIAL

METER SIZE:

GARBAGE RATE CODE:

READ BY:

APPLICANT NAME:		HOM	E PHONE #		
(PLEASE PRINT)		CF.	L BUONE #		
BUSINESS NAME:		CE	L PHONE #		
EMAIL ADDRESS:		WOF	K PHONE #		
BUSINESS LICENSE #:					
<u> </u>			<u>'</u>		
TYPE OF SERVICE REQUESTED:	WATER	WATER ☐ SEWER		GARBAGE □	
DATE FOR SERVICE TO BEGIN:					
SERVICE ADDRESS:					
MAILING ADDRESS (IF DIFFEREN	IT):				
OWNERSHIP STATUS:	ERSHIP STATUS: RENT □		own □		
INSIDE CITY LIMITS:			NO 🗆		
	-				
NEAREST RELATIVE NAME:			PHONE #		
ADDRESS:					
LANDLORD'S NAME:			PHONE #		
ADDRESS:					
HAVE YOU EVER HAD PREVIOUS SERVICE WITH THE CITY OF DAHLONEGA		YES 🗆	YES 🗆		
IF YES, WHAT NAME WAS THE P	RIOR ACCOUNT IN?				
IF YES, LIST LOCATION OF PRIOR	SERVICE				
 Applicant agrees to pay vinactive. Applicant agrees that in oby reason of any action on Applicant agrees that the express written permission Applicant agrees not to t Applicant agrees to imm Applicant is aware that a of property. Applicant must pay the A\$75.00 administrative fee v Applicant agrees to accept the agree that agree that agree the agree that	amper with the meter device in acco ediately contact the employees of th ny water loss by leakage or otherwis amount Due by the 10th of each mon vill be assessed, and the water servic ept garbage service if residence is ins onsible for payment of Amount Due,	by the City Council when there is erformed, the City shall not be lia their duly authorized officers, agreed by the city is limited to use or ordance with the City policy and one City in connection with any service on the premises served, will be ath, or a 10% penalty will be assessed will be disconnected without fuside city limits.	no water usage on ole for damages to ents, servants or e of only one (1) fam rdinances. vice problems that the sole responsib sed. If the Total Ar rther notice.	n account and when account has been account and when account has been at the dwelling or to any property of the mployees. In a might occur. In a	the Applicant uilding without rd to ownership th month, a
	cation and agree to be bound by sucl	h terms and conditions.	ith the City of Dah	nlonega. I understand the terms and	conditions
AMOUNT OF DEPOSIT:		DEPOSIT RECEIVED FROM:		RECEIPT #:	
SERVICE CHARGE:	DE	POSIT TRANSFERRED		PROCESSED BY:	
SLIVICE CHARGE.		FROM ACCOUNT #:		FNOCESSED BY.	
ACCOUNT NUMBER:		WORK ORDER #:			

METER REGISTER #:

DATE OF READING:

SEWER RATE CODE: