Porter Special Utility District

22162 Water Well Road
Porter, Texas 77365
Office: (281) 354-5922
Fax: (281) 354-5050

OWNER'S SERVICE APPLICATION and AGREEMENT

Applicant's Name:	_____	Co-Applicant's Name:	_____
Phone Number:	_____	Phone Number:	_____
DL / ID Number:	_____	DL / ID Number:	_____
Service Address:	_____		
Billing Address:	_____		
Email Address:	_____		

Owner Acknowledgement: I am the owner of the property located at the Service Address stated above, and I understand if service is terminated to such property I am jointly and severally liable for any fees and/or charges owed to Porter SUD and that all such fees and/or charges must be paid prior to any service reconnection, whether such reconnection is for the Applicant or a different person. (initials)____

A. The District shall sell and deliver water service to the Applicant and the Applicant shall purchase, receive, and/or reserve service from the District in accordance with the terms and conditions set forth in the District's Rules and Regulations, and other applicable policies and procedures.

B. All water service shall be metered by a meter(s) to be furnished and installed by the District. The meter connection is for the sole use by the Applicant and, unless designated as a "Master Meter", is to provide water service for only one (1) dwelling or business.

C. The Applicant shall be bound by the District's Rules and Regulations, which is not limited to but includes the following policies: Water Conservation Plan, Drought Contingency Plan, and Cross-Connection Control Program. Copies of these policies are available on the District's website.

D. The Applicant shall pay all service charges and fees in a timely manner, in accordance with the District's Rules and Regulations. Failure to make timely payment will result in the disconnection of water service. Water bills are due upon receipt. Late fees apply after the 15th of each month.

E. By signing this "Service Application and Agreement", the Applicant agrees that non-compliance with the terms of this Agreement or with the District's Rules and Regulations shall constitute denial or disconnection of water service until such time as the violation is corrected to the satisfaction of the District.

Account #_____ Work Order #_____ CSI Date:_____ Meter Reading:_____

Applicant's Name: _____ Co-Applicant's Name: _____

Service Address: _____

Meter Size/Type:	3/4" RES
Deposit:	$150.00
Application Fee:	$50.00
CSI Inspection Fee:	
Other (noted below):	
TOTAL AMOUNT:	$200.00
Payment:	$
Cash / Credit Card / Check #	

Comments/Notes:

CSI inspection may be required at Owner's expense and an RPZ backflow device may be required

Applicant's Signature: _____ Date: _____

Co-Applicant's Signature: _____ Date: _____

Porter SUD Representative: _____ Date: _____

Account #_____ Work Order #_____ CSI Date:_____ Meter Reading:_____