CITY OF WEBSTER

101 PENNSYLVANIA
WEBSTER, TEXAS 77598
(281) 316-4120

UTILITY ACCOUNT APPLICATION

ACCOUNT HOLDER NAME _____

Service Street Address _____

City _____ **Zip Code** _____

Requested Service Start Date _____

RESIDENTIAL ACCOUNT

DL# (proof required) State____

_____

SSN _____ - _____ - _____

Date of Birth _____

☐ Homeowner of this address (proof required)

☐ Renter

Landlord's Name _____

Landlord's Phone _____

Phone Number _____

Email Address _____

☐ Paperless - Please send my bill to the above email

☐ Please mail my bill to a different address

_____
Street

_____, _____
City State Zip

COMMERCIAL ACCOUNT

Type of Business _____

Accounts Payable Contact

Name _____

Phone _____

Email _____

☐ W9 Received TIN _____

☐ Paperless - Please send invoices to the above email

☐ Please mail invoices to a different address

_____
Street

_____, _____ _____
City State Zip

I understand that the City will begin water service by making a physical connection located at the meter outside the building or buildings to be served. I understand that the City will not have access to any building served and will not determine if there are any open faucets or water system leaks inside the building. I understand that I am responsible for services provided by the City as charged on my monthly bill. I understand that I am responsible for late fees, reconnect fees, and any charges incurred in accordance with City Ordinance(s). I understand and agree to abide by the service agreement on the next page of this application.

Applicant Signature _____ **Date** _____

Office Use Only

Account # _____-_____-_____ **Processed by** _____ **Date** _____

Deposit Amount _____ **Deposit Paid:** _____ **Service Order #** _____