

HENRY COUNTY PUBLIC SERVICE AUTHORITY
SERVICE ORDER TURN ON



Account Type

- Residential
- Non-Residential
- Institutional

This facility is operated in a nondiscriminatory basis with regards to race, color, national origin, religion, sex, familiar status, age, or handicap. Complaints of discrimination may be sent to the U.S. Secretary of Agriculture, Washington D.C. 20250

SCHEDULE A DISCOUNT () DISABLED DEPOSIT PAID: _____

NAME #1 _____ ACCOUNT # _____

NAME #2 _____ CUSTOMER # _____

SERVICE ADDRESS: _____

MAILING ADDRESS: _____

HOME PHONE: _____ WORK PHONE: _____

DATE OF BIRTH: _____ EMPLOYER: _____

SS #1: _____ SS #2: _____

IF TENANT, PROVIDE FOLLOWING IN ADDITION TO COPY OF LEASE:

LEASE DATE: _____

LANDLORD NAME: _____

LANDLORD ADDRESS: _____

LANDLORD TELEPHONE NUMBER: _____

I/We confirm that I am the () legal owner, () agent of owner, or () tenant of the property where service is requested.

I/We agree to use and pay for the service in accordance with the Henry County Public Service Authority Rules and regulations for water and sewer service which are or may come in force during the life of this contract.

In accordance with the Code of Virginia Sec. 15.2-5139 as amended, a lien may be placed on this property for nonpayment of utility charges and interest on this account.

SIGNATURE: _____ DATE: _____

SCHEDULED TURN ON DATE: _____

METER READING: _____

NEW READING: _____ BY: _____

NOTE: BE SURE ALL WATER IS TURNED OFF AT THE LOCATION OR WE WILL NOT BE ABLE TO CONNECT YOUR SERVICE AS SCHEDULED.