

Tap Fee: _____ Paid On: _____

Set Up Fee: _____ Paid On: _____

Receipt Number: _____

Parcel Number: _____

Transfer From: _____

Beginning Date: _____

**APPLICATION FOR WATER SERVICE - OWNER
MUSKINGUM COUNTY, OHIO**

This contract by and between Muskingum County Water Department and
Applicant, _____

whose mailing address is: _____

for service location at: _____

The applicant understands that water service hereunder shall be subject to Rules hereafter adopted by the Board of County Commissioners for the construction, maintenance, protection and use of County owned or operated facilities. The applicant further understands that all users of water supplies by the County must pay rates, connection charges and deposits and that those rates may be changed from time to time as the Board of County Commissioners considers advisable. The applicants' connection charges, water rates, and rules and regulations are available at the office. Please also note that you are required to pay a bi-monthly water bill, even if there is no water used.

Applicant's Signature _____ Date _____ Telephone/Cell _____

Place of Employment _____ Telephone _____