Set Up Fee: \$25.00 Paid On:	
Receipt Number:	
Transfer From:	
Beginning Date:	
APPLICATION FOR WATER SERVICE - OWNER MUSKINGUM COUNTY, OHIO	
This contract by and between Muskingum County Water Departme	ent 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

Other Telephone

E-Mail

Tap Fee: \$ Paid On: ____