

**CORAOPOLIS WATER & SEWER AUTHORITY**

1301 4<sup>th</sup> AVE

CORAOPOLIS, PA 15108

Phone: 412-264-3009 \* Fax: 412-264-6951

Web site: corapoliswater.org

**APPLICATION FOR SERVICE**

Name: \_\_\_\_\_ Account No. \_\_\_\_\_

(OFFICE USE ONLY)

Service Address: \_\_\_\_\_

Bill To Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Today's Date: \_\_\_\_\_ Service Date: \_\_\_\_\_

Spouse/Other \_\_\_\_\_ No. of People at this address: \_\_\_\_\_

I HEREBY MAKE APPLICATION FOR USE OF SERVICES AND AGREE TO BE GOVERNED BY THE RATES, RULES AND REGULATIONS ADOPTED BY THE AUTHORITY.

SIGNATURE \_\_\_\_\_

**If renting a deposit of \$115.00 must be received before service can be granted**

Owner Name: \_\_\_\_\_

Owner Address \_\_\_\_\_

City, State & Zip \_\_\_\_\_ Telephone No. \_\_\_\_\_