



NEW SERVICE APPLICATION

ODENVILLE UTILITIES BOARD
P.O. BOX 88
14487 US HIGHWAY 411
ODENVILLE, AL 35120
205-629-5801

NAME: _____ EMAIL: _____

SPOUSE: _____ # IN HOUSEHOLD: _____

SERVICE LOCATION (STREET ADDRESS): _____ MAILING ADDRESS (IF DIFFERENT): _____

CELL PHONE: _____ WORK: _____ HOME: _____

CUSTOMER SS# OR TAX ID#: _____

EMPLOYER NAME: _____

OWNER NAME – IF PROPERTY IS RENTAL: _____

_____ **PLEASE SIGN ME UP TO RECEIVE TEXT/EMAIL ALERTS (USING THE INFORMATION ABOVE)
FOR WATER OUTAGES/NOTIFICATIONS** _____ (customer initials)

In making this request to receive water service from the Odenville Utilities Board, I hereby agree to the following:

1. To promptly remit payment each month for services and charges billed.
2. I understand that occasional stoppage of water flow due to accidental damage or to make alterations, repairs, or improvements to the water system, is unavoidable and agree to make no claim for damages arising from such stoppage, including disconnection for non-payment.
3. To maintain my plumbing and fixtures in good working condition and to promptly repair leaks in my plumbing system.
4. To not allow the connection to my plumbing system of any water piping for the purpose of providing water service to any other residence or dwelling. It is understood that this will constitute an illegal connection and will subject me to immediate disconnection until such illegal connection is removed.
5. To be bound by the Odenville Utilities Board Schedule of Rules and Regulations as presently on file and from time to time amended.
6. An applicable security deposit and **\$15 account set-up fee** are required with this service request.

SIGNATURE: _____ DATE: _____

FOR OFFICE USE: CLERK: _____

DEPOSIT AMOUNT: \$ _____ CASH: _____ CHECK #: _____ CARD: _____ DATE: _____

ACCOUNT #: _____ CUSTOMER #: _____ TURN ON DATE: _____