

Application for Water Service
Northern Cambria Municipal Authority

Date of Application _____ Service Start Date _____

Customer Name _____

Service Address _____

Mailing Address _____

(If different from Service address)

Phone Numbers: Home _____ Cell _____

Work _____ Email _____@_____

No. in Household _____ Check one: Owner ☐ Tenant ☐

If renting or renting to own, provide the following Landlord Information:

Landlord's Name _____

Address _____ City/State/Zip _____

Phone Number _____

Photo ID must be copied on back of this application

Security Deposit of \$175.00 must be paid in order to put account into tenants name.
(\$150 refundable at final billing - \$25 Administrative Fee)

Amount Paid _____ Check # _____ Staff Initials _____

The applicant hereby agrees to abide by the rules and regulations of the Northern Cambria Municipal Authority and to pay all water charges for services provided under the rate schedules currently in effect and as amended in the future, until notice is given to discontinue service to this account.

Signature of Customer

Date