



The Great Salt Bay Sanitary District

Water and Wastewater

Water Division - Application for Service

Please complete and return to the GSBSD office along with a nonrefundable application fee of \$13.75.

Owner _____ Phone _____

Tenant _____ Phone _____

Address to be served _____

Mailing Address _____

Place of Employment _____ Phone _____

Email _____ Please send my bill by email ()

Own () Rent () Number of People _____

Have you had previous water service with us? Yes () No ()

I/We request that the Great Salt Bay Sanitary District (GSBSD) provide metered water service at the above address. The meter is to remain the sole property of GSBSD and I/We agree to use the same in accordance all the rates, rules and regulations now in force or which may hereafter be put in force. I/We agree to properly protect the meter from freezing or accidental damage and will not permit tampering with or removal of same except by an authorized person or representative of GSBSD. It is understood and agreed that the authorized person or representative shall have access to the meter at all reasonable times and that I/We will be will be responsible for said meter while in the above property, and will pay for all repairs made on said meter where damage results from improper care. I/We understand that the accounts must be paid in full each billing period unless some other arrangements are made.

Applicant's Signature _____ Date _____

FOR OFFICE USE ONLY:

Customer # _____

Eff. Date _____