



# UTILITIES DEPARTMENT

59 Lee Street Winder, Georgia 30680 Phone: (770) 307-3014  
Email: dmoss@barrowga.org

## Application for New Service, Capacity & Connections

### Section 1: TO BE FILLED OUT BY THE APPLICANT

A copy of your photo ID and Lease Agreement or Ownership Record must be returned with Application.

Subdivision/Project Name \_\_\_\_\_ Lot # \_\_\_\_\_ Parcel # \_\_\_\_\_

Physical Street Address \_\_\_\_\_

Development:  Residential  Commercial Service(s) Needed:  Water  Sewer # of Occupants \_\_\_\_\_

Requested Domestic Meter Size:  ¾"  1"  2"  3"  4"  6"  8"  10"  12"

Requested Irrigation Meter Size:  ¾"  1"  2"  \_\_\_\_\_

Name of Applicant \_\_\_\_\_

Billing Address \_\_\_\_\_

Phone # \_\_\_\_\_  Cell  Home

Driver's License (or) Tax ID # / State \_\_\_\_\_

Email Address \_\_\_\_\_ **Monthly Bill will be emailed unless paper copy is requested.**

Paper Bill Only  Paper & Email Bill

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

<b>Section 2: TO BE FILLED OUT BY UTILITIES DEPARTMENT</b>			
Type of Connection:	<input type="checkbox"/> County Installed	<input type="checkbox"/> Builder Installed	Irrigation Tap: <input type="checkbox"/> On Service <input type="checkbox"/> On Main
Treatment Plant:	<input type="checkbox"/> Barber Creek	<input type="checkbox"/> Cedar Creek	<input type="checkbox"/> Mulberry River <input type="checkbox"/> Tanner's Bridge
*Account Deposit Fee	\$ _____		Date Payment Received _____
Water Capacity Fee	\$ _____		Payment Method _____
Water Connection Fee	\$ _____		ID & Records Received _____
Irrigation Meter Fee	\$ _____		Received by _____
Sewer Capacity Fee	\$ _____		Customer Number _____
Sewer Connection Fee	\$ _____		Account Number _____
Other	\$ _____		Work Order Number _____
TOTAL DUE	\$ _____		

\* Deposit Fee is refundable when customer account is closed unless it has been applied to a delinquent/unpaid balance.

Office Use:  Payment Posted  Capacity Logged  Voucher Given Date \_\_\_\_\_