

**ODENVILLE UTILITIES BOARD
P.O. BOX 88 – 14487 US HWY 411
ODENVILLE, AL 35120
205-629-5801 FAX: 205-629-5769**

NAME: _____ EMAIL: _____

SPOUSE: _____ # IN HOUSEHOLD: _____

SERVICE LOCATION (STREET ADDRESS): _____

MAILING ADDRESS (IF DIFFERENT): _____

HOME PHONE: _____ WORK: _____ CELL: _____

EMPLOYER NAME & ADDRESS: _____

OWNER'S NAME (IF RENTAL): _____

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. A \$10.00 account setup fee and applicable security deposit are required with this service request.

SIGNATURE: _____ DATE: _____

OFFICE USE

CLERK: _____ CASH: _____ CHECK #: _____ DEPOSIT: _____ DATE: _____

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