APPLICATION FOR WATER/SEWER SERVICE MUNICIPAL AUTHORITY OF WASHINGTON TOWNSHIP

This Credit Deposit Application for Water/Sewer Service is subject to the Rules and Regulations established by the Municipal Authority of Washington Township. A deposit in the amount of One Hundred Dollars (\$ 100.00) is required with this application, payable to MAWT. The deposit is refundable after a period of three years if payments have been satisfactory and there is no balance due on the account, or it may be applied to your "Final Bill" when vacating the premises. Refunds are optional and discretionary with the Authority after review of payment records in accordance with the general rules.

By signing this application, you agree to protect the meter from freezing or rough usage, and that you will be responsible for all charges incurred at this address.

Bills are issued monthly and are determined by meter registration. Minimum charge for water service per month is \$26.00 and sewer is \$63.55 (\$48.15 if vacant house with water off). A 2,000 gallon usage allowance is included in the monthly charge. Any usage over 2,000 gallons will be billed at \$5.20 (water) and \$7.70 (sewer) per 1,000 gallons. Meters are read quarterly and the excess usage will be billed quarterly with minimum bills all other months. Approximately 20 days are given for payment of your bill, after which a 5% penalty is assessed. If the balance remains unpaid after 10 additional days, a delinquent notice will be sent with a water shut-off date if the account remains unpaid. You will be billed for any charges connected with collecting unpaid bills. If a check is returned for insufficient funds, a \$45.00 fee will be added to the account. If water is shut off for a delinquent account, a \$50.00 fee will be added to the account.

Deduction meters are available for rent or purchase to meter water usage not entering the sewage collection system.

If service is to be discontinued at this service location, the Authority is to be notified and arrangements made for the proper termination of service within 5 days. Failure to notify the Authority will necessitate additional charges on this account.

Please Check One:	Owner	Landlord 🗌		Tenant	
NAME					
		and Zip code			
ADDRESS WHERE B	ILLS ARE TO BE SEN	Т			
PHONE NUMBER: HO	OME	WORK	CELL		
		ndlord, address and telepho the scheduled turn on date of			ED if
NAME OF LANDLO	RD				
CITY, S NAME OF FORMER	STATE, AND ZIPCODI TENANT IF KNOWN	E 			
		formation is correct and that ater service at the above serv		r according to the Rule	s and
Signed			Dated		
	D(O NOT WRITE BELOW TH	IIS LINE=====		
			Amo		
Comments		_ Driver License Number	State	e Licensed	

MAWT, 1390 Fayette Ave, Belle Vernon, PA 15012 (724) 929-3370 (phone) (724) 929-2680 (fax) TTY/TDD 711 www.mawt.net

[&]quot;MAWT is an equal opportunity provider and employer."