	Dogwood Hills _	Other			Acct #		
	Scanned	Rate Code	Book	Entered By	Enter GIS		
Above section for office use							
		Gu	County L 10271 Expre Ilfport, Missis Office: (228) Fax: (228) 8	ssippi 39503 868-8752	Y		
			www.hcua	a-ms.us			
		Applicatio	n for Water S	Service (Residential	I)		
Service/Physi	cal Address:				State/Number:		
May we cont	act you via Email? \	′ES(or) NO	Email:				
Place of Emp	loyment:		Pho	ne:			
-							
<u>References</u>			Phone: Phone:				
Date Service	Requested:						
	********Be	elow Section for Ne	w Constructi	on Water Service (Residential)********	*	
Water Servic	<u>e</u>						
Tap Size Requ	lested:	i	n. F	Proposed domestic	water line size:	in.	
Proposed water meter size:			in. F	Proposed irrigation	water line size:	in.	
Proposed irri	gation meter size:		in. I	s there a well onsite	e? YES NO		
				•	er lines serving the hom then a backflow preven		
Proposed ope	erating pressure:		psi.				
Water Main F	Pressure: static	psi,	residual	psi			
Is a pressure	reducing valve requ	ired? YES N(D				
				ing a Harrison Cour	nty Health Department	approved sewer	

system on property for which water service is requested. This includes installing a Health Department approved IOWDS if public sewer is not available.

UTILITY PLAN: Return this application with two (2) sets of the Utility Plans for the proposed commercial site development. The utility plan will be reviewed and approved according to HCUA specifications and standards. The field work shall substantially conform to the approved utility plan.

HCUA: The Harrison County Utility Authority agrees to provide potable water at the designated tap point to the Retail Water Provider and the Applicant. The Harrison County Utility Authority owns and is responsible for maintenance of this service lateral from the water main to the meter.

RETAIL WATER PROVIDER: The Retail Water Provider will read the meter on a regular basis, invoice the applicant, and collect the fees. The retail water provider owns and is responsible for maintenance of the water service from the main to the water meter.

APPLICANT: The Applicant agrees to pay tap fees and costs associated with making the tap and monthly water use. The Applicant owns and is responsible for maintenance of the water service from the back of the meter to the house.

ALL APPLICANTS:

Please return the following items with this application:

C A Copy of Lease Agreement, Deed, Settlement, or Purchasing contract

🗌 \$50 Water Deposit (non-refundable)

🗌 \$40 Account Setup Fee

Tap Fee as quoted in the Will Serve Letter (if applicable)

This application is part of an agreement for services. Water service is subject to the rates and policies set by HCUA. All bills are payable by the 30th of the month. A late fee will be charged for those payments made after the 10th of the month. Non-Payment may result in disconnection or other legal action. **NOTE:** Customer must notify HCUA when the service address is no longer the customer's residing address by proof of legal documentation. Until such documentation is provided service will remain in customer's name. I also understand any information I give can be used as resources for collection on my account. I agree and understand this agreement.

Applicant:

Signature	Date
Signature	Date
Retail Water Provider:	
Signature	Date