



Service Application

Utility Billing Department
3805 Adam Grubb
Lake Worth, TX 76135
Office: 817-255-7900
Email: ub@lakeworthtx.org

Account Number:	Service Address:
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Service for: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Irrigation Meter <input type="checkbox"/> Fire Hydrant	
<input type="checkbox"/> Home owner/Real Estate Agent <input type="checkbox"/> Renter (inspection expires _____)	
<input type="checkbox"/> Transfer from _____ Acct # _____ disconnect on: _____	

Applicant or Company Name:			
Mailing Address:	City:	State:	Zip:
Cell Phone:	Additional Phone:		
E-mail			
DL #:	DOB:	SS# or Tax ID#	
Employer:	Work phone number:		

I would like to donate \$_____ monthly to the City of Lake Worth Park Fund

I would like to receive my water bill via: ☐ mail only ☐ E-mail only ☐ Both mail & E-mail

TERMS OF SERVICE

1. Payment is due upon receipt, but no later than the 15th of each month.
2. All unpaid balances will receive a \$10.00 or 10% penalty, whichever is greater, after the 15th day of each month and are subject to disconnection of service.
3. If payment is not received by disconnect date a \$30.00 non-refundable disconnect list fee will be assessed regardless of interruption of service and a \$30.00 reconnection fee (if payment received before 4:00 pm).
4. A \$30.00 service charge will be added to all returned checks, regardless of the reason.
5. An additional \$100.00 will be added for service connected/reconnected after 4:00 pm or on weekends.
6. In order for water service to be connected if not currently on, you or your representative must be on the premises. **NO EXCEPTIONS.**
7. You will be fully responsible for any and all damages/tampering with the meter(s) that service this address.

Notice of Disclosure of Water Customer Information:

In compliance with House Bill 872, passed by the 87th Texas Legislature on April 21, 2021; personal information and information regarding customer usage, services, and billing, including amounts billed or collected for utility usage is deemed confidential.

I wish for service to be connected on: _____ ☐ 10:00 am - 12:00 pm ☐ 3:00 pm - 5:00 pm
For same day service choose: (if paid by 9:00 AM) (if paid by 1:00 PM)

Applicant Signature:	Printed Name:	Date:
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OFFICE USE ONLY

Deposit amount: \$	Date Paid:	Receipt Number:	
<input type="checkbox"/> Transfer Fee (\$20.00) Paid on:	Date Paid:	<input type="checkbox"/> New Service Fee (\$20.00)	
	Receipt Number:	<input type="checkbox"/> Exemptions	
Entered by:	Date:	<input type="checkbox"/> SA on file	<input type="checkbox"/> WO done
Comments:			