

# Town of Farmville New Water/Sewer Customer Form

Name: \_\_\_\_\_ Customer # \_\_\_\_\_

Driver's License # \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_

Location Address: \_\_\_\_\_ Farmville, VA 23901

Mailing Address: \_\_\_\_\_

Student Home Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

E-Bill

By Checking this box, you authorize your utility bills to be sent via email.

Phone Number: \_\_\_\_\_

Today's Date \_\_\_/\_\_\_/\_\_\_ Turn on Date \_\_\_/\_\_\_/\_\_\_ Deposit Date \_\_\_/\_\_\_/\_\_\_

\*Forms must be received by no later than 12 noon the day of turn on, any forms received after that will be processed the next business day\*

Choose one of the following:

Owner No Deposit    In-Town Res \$100    Out of Town \$150    Commercial \$200

Name of Landlord: \_\_\_\_\_

I certify that I am the **legal owner/renter/property manager** of the property located at \_\_\_\_\_.

I acknowledge that I am legally responsible for the payment of this bill and agree that the statute of limitation shall not bar efforts to collect any balance here under.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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By signing this form, I agree to be at this location \_\_\_\_\_ between the hours of 1:00 pm and 2:00 pm on \_\_\_\_\_. I understand that if I am not at this address when the meter reader turns the water meter on and the meter is turning, indicating water being used; the meter will be turned back off. Should this occur, the water meter will be turned on the following business day between the times of 1:00pm and 2:00pm.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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I hereby request that the Town of Farmville turn the water on at the following address: \_\_\_\_\_ I understand that the Town of Farmville prefers someone be at this address when the water is turned on. I will not be able to be at this address when the water is turned on; therefore, I will not hold the Town of Farmville responsible for any damages resulting from the act of turning water on at the above stated location on this date: \_\_\_\_\_.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return completed form with any applicable deposit to the Town of Farmville Treasurer's office:  
**In office:** 116 N. Main St, Farmville VA 23901, Drop-box located on the front of the building.  
**Mail:** P.O. Drawer 368, Farmville VA 23901 **Email:** Finance@farmvilleva.com **By Fax:** 434-392-6135  
Please call the Treasurer's office with any questions 434-392-3333