

BUSINESS/COMMERCIAL

WEST LAUDERDALE WATER AUTHORITY

3353 County Road 200 * Florence, AL 35633

(P) 256-766-8787 * (F) 256-766-8774

Web Site: wlwa1 * Email: wlwa1@hotmail.com

Date: _____

Business/Company Name: _____

Service Address: _____

Own: ___ Rent ___ Landlord Name: _____ Landlord Ph#: _____

Billing Address: _____

Business Phone#('s) _____ Fed.Tx I.D.# : _____

Owner of Business: _____ Business Owners Driver Lic# _____

Business Owners home address: _____

Business Owners home Ph: _____ Business Owners Cell Ph: _____

Additional Contact Person _____ Ph# _____

Service Origination Fee (NON REFUNDABLE) \$150.00

Emergency Contact other than persons listed above:

Name _____ Phone# _____

I am requesting the above service and understand I am responsible for payment of the charges on this account until I notify West Lauderdale Water in writing that I no longer want this service. I also understand the Account Origination Fee I paid is non-refundable, and will never be applied to my account. I hereby declare under penalty that I am a United States Citizen or I have a lawful presence in the United State.

Signature(Person Responsible For Account Payment)

Date

Gender: Male ___ Female ___

Race: White ___ Black/African American ___ American Indian/Alaska Native ___
Asian ___ Native Hawaiian or Other Pacific Islander ___

Ethnicity: Not Hispanic or Latino ___ Hispanic or Latino ___