

New Meter Application Clayton County Water Authority Residential

E-mail: ccwa_customerservice@ccwa.us

Builder Information

Builder:	If application, quote #:							
Contact Name:	E-mail address:							
Primary Phone Number:	Primary Phone Type:							
Alternate Phone Number: Alternate Phone Type:								
Mailing Address:								
Street Address	Unit/Lot#							
City	State Zip Code							
Tax Identification or Social Security #:								
Number of Meters:								
Name of Subdivision:								
Are you inside the city limits? YES NO If yes, city?								
Service Information								
Name on the account (if different from the builder):								
Primary Phone Number:	Primary Phone Type:							
Alternate Phone Number: Alternate Phone Type:								
E-mail Address:								
Billing Address:								
By signing, the customer agrees that any information listed in the above appli ation is correct and that he or she has received the "Location for Water Services" form.								
Print Name Signature	Date							
Office Use Only								
Is this subdivision on the "Approved to Set List?"	TYES NO							

Type of Service:		U Wate	Water/Sewer		Water Only			
	with fire protection red		YES		0 in 1" meter with fi	re protection *		
Existing Met			New Meter?		□ NO	re protection.		
Service Locations								
1.			9					
2			10					
3.			11					
4.			12.					
5.			13.					
6.			14.					
7			15.					
8.			16.					