CLAYTON COUNTY Water AUTHORITY

New Meter Application
Clayton County Water Authority
Commercial and Residential
E-mail: newmeterapp@ccwa.us

SERVICE ACCOUNT INFORMATION
Residential / Builders (Only Residential account)

Name of Account Holder:	
Primary Phone:	Alternate Phone:
☐ Work ☐ Cell ☐ Home	☐ Work ☐ Cell ☐ Home

E-mail Address:	
Billing Address (only):	Best Contact Person: **(Phone, Name & E-mail)**

SSN:	Business ID #:
Number of Meters:	Name of Subdivision (if applicable):
Are you within the city limits? ☐ Yes ☐ No	If yes, which city?

SERVICE ACCOUNT INFORMATION
Commercial Use Only

Name of Account Holder:	
Primary Phone:	Alternate Phone:
☐ Work ☐ Cell ☐ Home	☐ Work ☐ Cell ☐ Home

E-mail Address:	
Billing Address (only):	Best Contact Person: **(Phone, Name & E-mail)**

Tax ID / EIN #:	Number of Meters:
Are you within the city limits? ☐ Yes ☐ No	If yes, which city?

By signing, the customer agrees that any information listed in the above application is correct and that he or she has received the "Location for Water Services" form.

Customer Signature:	**Date:**

OFFICE USE ONLY

Type of Service: ☐ Water/Sever ☐ Water Only ☐ Commercial ☐ Industrial ☐ Government ☐ Hotel/Motel ☐ Multi-Family

Is a 1" meter with fire protection required? ☐ Yes ☐ No Existing meter? ☐ Yes ☐ No New meter? ☐ Yes ☐ No

Square Footage:	Existing locator? ☐ Yes ☐ No Sewer Tap? ☐ Yes ☐ No Downsize? ☐ Yes ☐ No Upsize? ☐ Yes ☐ No

For Sewer Deduct: Will the facility be producing any processed wastewater from manufacturing? ☐ Yes ☐ No

Will the facility request a sewer deduction due to the use of water in their product or in cooling towers, boilers, etc.? ☐ Yes ☐ No

If yes to either sewer deduct questions, contact Environmental Compliance 770-478-7496 ext. 217 or 205

SERVICE LOCATIONS

Type/write the **ADDRESS AND LOT NUMBER** details for each location below:
Meter Quote #_____

1		12	

2		13	

3		14	

4		15	

5		16	

6		17	

7		18	

8		19	

9		20	

10		21	

11		22	