

**CROWN MOUNTAIN WSC METER INSTALLATION REQUEST**

P.O. Box 305, Camp Wood, TX 78833

830-499-1105

Website: cmwsc.com

Property Owner Name:

Property Owner Account Number:

Property Owner Phone #:

Email:

:

Property Owner Mailing Address:

Service Address:

Development:

Lot #:

Is this a Residential property?

Yes

No

Purpose of use:

Service Size requested:

¾"

1"

1.5"

2"

Other

Comments:

NOTE: It may take up to 8 weeks to have a meter delivered.

**The undersigned hereby agrees to all provisions of the Crown Mountain Water Supply Corporation Service Agreement and Tariff. I am the owner of the above property or the owner's duly authorized agent with authority to make this application. As owner, I will be personally bound and in my individual capacity honor and pay all obligations and amounts due that rise out of this application; or as authorized agent, I do hereby agree that in the event the owner of said property denies said agency relation or my authority to enter in this agreement, or if the owner fails to honor or comply with the terms and conditions herein imposed, I will be personally bound and in my individual capacity honor and pay all obligations and amounts due that rise out of this application.**

Signature of Applicant

Date

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**For Office Use Only**

Request approved by Board of Directors?

Yes

No

Date approved:

Date meter ordered:

Date meter received:

Meter #:

Date meter installed:

Initials of person processing request:

CSI received date: