

## UTILITY BILLING DEPTARTMENT 181 LARKIN STREET/P.O. BOX 785 CORNELIA, GEORGIA 30531 PHONE: 706-778-8585

## **Utility Service Application**

Applicant/Company Name				
SSN#/Tax ID		Driver's	License#	
Employer Name/Address/Phone	;			
911 Service address				
Mailing Address (if different)				
Phone F	Email	Pr	eferred Contact: □ Phone □	Text □ Email
Please Circle Own or Rent				
Landlord's Name/Phone				
Date service is to be connected_				
Have you had previous service w	ith the City of Cornelia?	□Yes	□No	
If so, what name/address was on	your prior account?			
Check which service(s) you	are applying for:			
☐ Residential water only	☐ Commercial water of	only	☐ Industrial water only	$\square$ Irrigation/non-sewer
☐ Residential water/sewer				☐ Garbage*
*Garbage service is only available t services.	o residential customers ins	side city lir	nits and will be automatically b	illed with monthly utility

The above hereby applies for services with the City of Cornelia and agrees to the following terms and conditions.

- 1. A \$100 deposit is required for service and must be paid with application. The City reserves the right to collect any outstanding utility bills owed to the City by the applicant before new service is established.
- 2. Picture ID and closing documents or rental lease agreement are required to establish service.
- 3. Applicant agrees to pay the City of Cornelia in accordance with the schedule of fees for services rendered at the above address. Payments can be made online at <a href="www.corneliageorgia.org">www.corneliageorgia.org</a>, at City Hall, via mail, or ACH draft. For after hour payments, customers can also use the Utility Payment drop box located outside of City Hall.
- 4. Applicant agrees to pay monthly utility bills as provided by the City of Cornelia on the 15<sup>th</sup> of each month with no penalty. Bills paid after the 15<sup>th</sup> of the month will be subject to a 10% late fee and disconnections without further notice. A \$50 reconnection fee will be charged if service is disconnected for non-payment. All disconnected accounts paid after 2:00pm will be reconnected the next business day.
- 5. A fee of \$25.00 will be charged on checks or bank drafts returned for any reason and water service may be subject to disconnect.
- 6. Applicant agrees that the water service to be rendered by the City is limited to use of only one (1) family dwelling house or commercial building.
- 7. Applicant will ensure all inside plumbing is shut off. Any damage as a result of open faucets or leaks inside the building are the Customer's responsibility.
- 8. Applicant agrees not to tamper with the meter device in accordance with the City policies and agrees to immediately contact the City in reference to any service problems or leaks which might occur.

- 9. Applicant agrees to contact Cornelia City Hall and submit a Disconnection Request form when they are ready to terminate service.
- 10. All water service requires a working backflow on the property owner's side of the meter. Commercial, or industrial customers require an annual backflow test by certified tester. Test records must be submitted to the Utilities Specialist by email or dropped of at City Hall.

As stated above, I am applying for service with the City of Cornelia, and I understand these terms and conditions are a part of this application and agree to be bound by such terms and conditions. I verify that the above information is correct to the best of my knowledge. I understand that providing false information may result in the rejection of my application or disconnection of services at a later date.

Applicant Signature	Date			
Witness	Date			
discrimination against applicants seeking t encouraged to do so. This information will	by the Federal Government to monitor compliance with Federal Laws prohibiting of participate in the program. You are not required to furnish this information but are not be used in evaluating your application or to discriminate against you in any way, are required to note the race, national origin of individual applicants based on visual of the following.			
□White, not of Hispanic origin	□Asian or Pacific Islander			
□Black, not of Hispanic origin	□American Indian or Alaskan native			
□Hispanic				
This is an Equal Opportunity Program; Discrimination is prohibited by Federal Law. Complaints of discrimination may be filled with the Secretary of Agriculture, Washington, DC 20250."				

## Information verified by\_\_\_\_\_\_\_ Date Processed \_\_\_\_\_\_\_ Account#\_\_\_\_\_\_ Meter Serial#\_\_\_\_\_\_ Amount Paid \$\_\_\_\_\_\_ Deposit transferred from account #\_\_\_\_\_\_\_ Water Tap \_\_\_\_\_\_\_ Sewer Tap