

# ALCO WATER SERVICE

## CONNECT ORDER

CYCLE NO:	ACCT. NO:	WORK ORDER NO:
INSTALL NEW SERVICE:	INSTALL METER:	
DATE CALLED:		DATE WANTED:
NAME: Spouse Name:		
STREET:		CITY:
SEND BILL C/O:		
COMMENTS:		
<b>CONTRACT</b>		
<p>I HEREBY REQUEST ALCO WATER SERVICE TO SUPPLY SERVICE AS STATED HERE ON, UNTIL THE RECEIPT OF FORMAL NOTICE FROM ME REQUESTING DISCONTINUANCE OF THIS SERVICE. I AGREE TO PAY FOR SUCH SERVICE PROMPTLY EACH BILLING PERIOD ACCORDING TO THE STATEMENT SHOWN BY THE METER AT THE REGULAR RATES APPLICABLE FOR SUCH SERVICE AS PROVIDED IN THE RATES, RULES AND REGULATIONS OF ALCO WATER SERVICE, WHICH HAVE BEEN APPROVED BY THE CALIFORNIA PUBLIC UTILITIES COMMISSION. 48 HOURS' NOTICE FOR DISCONTINUANCE OF SERVICE MUST BE GIVEN AS PER RULE NO. 11.</p>		
OWNER:	TENANT:	REAL ESTATE AGENT:
PROPERTY MANAGER:		
DEPOSIT:	CASH:	CHECK:
		CHECK NO:
EMPLOYER:		SPOUSE EMPLOYER:
EMP. PHONE:		EMP. PHONE:
HOME PHONE:		SOCIAL SECURITY NO: <b>XXX-XX-</b>
SOCIAL SECURITY NO: <b>XXX-XX-</b>		I.D NO. : EXP DATE:
I.D NO:	STATE/TYPE:	EXP DATE:
PREVIOUS ADDRESS:		
CLERK'S NAME:		
<b>VOID CONNECT ORDER</b>		
NAME:	DATE:	PHONE#:
REMARKS:		
<b><u>CUSTOMER'S SIGNATURE:</u></b>		
X	Date: _____	