ALCO WATER SERVICE

CONNECT ORDER

CYCLE NO:	YCLE NO: ACCT. NO:			WORK ORDER NO:			
INSTALL NEW SERVICE:	TALL METER:			REAL	READ AND TURN ON:		
DATE CALLED:			DATE WANTED:				
NAME:							
STREET:			CITY:				
SEND BILL C/O:							
COMMENTS:							
CONTRACT 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.							
OWNER:	TENANT:	REAL ESTATE AG	GENT: PROPEI		TY MANAGER:		
DEPOSIT: CASH CHECK CHECK NO:							
EMPLOYER:				SPOUSE EMPLOYER:			
EMP. PHONE:				EMP. PHONE:			
HOME PHONE:				SOCIAL SECURITY NO: XXX-XX-			
SOCIAL SECURITY NO: XXX-XX-			I.D NO. :			EXP DATE:	
I.D NO:		STATE/TYPE:			EXP DATE	KP DATE:	
PREVIOUS ADDRESS:							
CLERK'S NAME:							
VOID CONNECT ORDER							
NAME: DATE:			PHONE#:				
REMARKS:							
CUSTOMER'S SIGNATURE:							
X	Date:						