



Form filled in the Presence of .....

Signature of Officer

# NAROK WATER AND SEWERAGE COMPANY LTD.

W.S.D. [REVISED]

WATER SUPPLY

## CONSUMER AGREEMENT

Narok Water & Sewerage Co. Ltd.  
P.O. Box 935-20500  
Tel: +0202419704  
NAROK NORTH

**Check List for Officer filling the form**

- ☐ Confirmation of payments/deposit?
- ☐ If it is migration, what is connection no?
- ☐ Are there all required documents attached?

I .....

(FULL NAME IN BLOCK CAPITALS, SURNAME FIRST)

Here make application to the appointed water undertaking to the above water supply of water to:

Plot No		Section No	
House/Flat No	Zone	Village/Area	

Category (Select One)	<input type="checkbox"/> Domestic Use	<input type="checkbox"/> Water Kiosk/Yard	<input type="checkbox"/> Borading House
	<input type="checkbox"/> Business Premises	<input type="checkbox"/> Industry	<input type="checkbox"/> Fire Fighting
Connection Type	<input type="checkbox"/> New Connection	<input type="checkbox"/> Migration from OLD Network	
Receipt/M-PESA No		Amount Paid	
Number of Users		ID No	
Postal Address		Phone No	

Date: .....

Signature of the Applicant

### FOR OFFICIAL USE ONLY

**APPLICATION AUTHORIZED BY**

Date: .....

Sign: .....

**TECHNICAL MANAGER.****FOR DEPARTMENT**

Clearance Confirmed By:

Date: .....

Name: .....

**REVENUE OFFICER**

Connection Installed By :

Date: .....

Name: .....

Sign: .....

Connection Number			
Meter No		Meter Rent	KShs.
Size of Meter	DN13 / DN20 / DN25 / DN38 / DN50 / Others( )		
Location of Meter	Longitude	Latitude	
Date Water Turned on:			
REMARKS			

**APPLICATION APPROVED BY**

Date: .....

Sign: .....

**MANAGING DIRECTOR.**