

APPLICATION FOR WATER OR WASTEWATER

WHITE PINE WATER DEPARTMENT
TOWN OF WHITE PINE, TENNESSEE

Acct. No. _____

Name Street Address Mailing Address

Premises to be served — Inside Corporate Limits Outside Corporate Limits Phone No. _____

Connection Size	Meter Size	Charges
_____	_____	_____
_____	_____	_____
_____	_____	_____

I agree to abide by and obey the Rules and Regulations and Rates of the City of White Pine Water Dept. now in force or which may be adopted hereafter.

Signature of Applicant

Date _____

Remarks: _____

