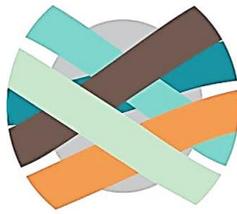


City of Claremont  
P.O. Box 446  
3288 East Main Street  
Claremont, N.C. 28610  
(828)466-7255  
FAX (828)466-7185



Account #: \_\_\_\_\_

Connect Date: \_\_\_\_\_

**City of Claremont**  
**Residential Water/Sewer Service Application**

Service Address: \_\_\_\_\_

Name: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Driver's License or ID #: \_\_\_\_\_ State: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Work or Home Phone #: \_\_\_\_\_

Spouse's Name (IF APPLICABLE) : \_\_\_\_\_

Social Security #: \_\_\_\_\_

Driver's License or ID #: \_\_\_\_\_ State: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Work or Home Phone #: \_\_\_\_\_

Mailing Address (If Different): \_\_\_\_\_

Have you had service with the City of Claremont previously? Yes  or No

Do you owe any outstanding debts to the City of Claremont? Yes  or No

Do you Own?  Or Rent?

Landlord: \_\_\_\_\_ Phone #: \_\_\_\_\_

Deposit Required: \$ \_\_\_\_\_ (Cash or Check only)  Cash or  Check # \_\_\_\_\_

Please make all checks payable to: **City of Claremont**

*\*(In reference to N.C.G.S. 25-3-506: Returned checks will be charged a \$25.00 insufficient funds processing fee & N.C.G.S. 6-21.3: a \$7.00 bank fee along with the amount of the returned check)*

**Connections**

Please take proper steps to ensure the safety of your property before your service is connected or disconnected. Make sure all faucets are turned off. Please note that the City of Claremont will not assume liability for any damage done to your property from the result of connecting or disconnecting services because of any water outlet not properly secured. Connections and disconnections must be in writing.

**Monthly Billing**

Meters are read around the 20<sup>st</sup> of each month, and bills are calculated and mailed the first business day of the month. Water bills are always due by the 27<sup>th</sup> of the month, even if it falls on a weekend. On the 28<sup>th</sup> of the month, a \$20.00 late fee penalty is applied for non-payment. Service is subject to disconnection if payment is not received before the cut-off date, which is indicated on your bill and is typically 5-7 days after the due date. A \$50.00 reconnect fee will be applied and services are not resumed until payment of all charges and penalties are made. We accept cash, personal checks, money orders, Visa, MasterCard, and Discover card. Debit or credit cards are accepted for water and sewer bills paid inside City Hall, no phone payments will be accepted.

For your convenience, there is a drop box for payments located beside the drive-thru window. Payments can be dropped in the box after hours and on weekends or holidays to avoid any late fees or penalties.

Bills will continue to be calculated until applicant notifies the City of Claremont of termination of service. It is the applicant’s responsibility to notify the City in writing of termination of all services. The final bill will be calculated from the last meter reading at the time services are disconnected during the next billing cycle. Upon closing the account, the City will refund the deposit less any amount owed to the City or billed for the difference. The refund is paid by check to the account holder who is responsible for providing the City with a forwarding address.

*\*The City of Claremont, under G.S Chapter 105A, has the right pursuant to the N.C. Setoff Debt Collection Act to collect any sum due and owed by the applicant. If the City of Claremont chooses to pursue debts owed by the applicant through the Setoff Debt Collection Act enacted by the NCACC and the NCLM, the applicant agrees to pay all fees and penalties incurred through the setoff process, including but not limited to, fees and costs charged by the NCDOR, NCEL, N.C. Capital Management Trust, N.C. Local Government Debt Setoff Clearinghouse, Five Star Computing, and the City of Claremont. By signing this form, I hereby certify the information provided is accurate and true; and understand and agree to comply with the provisions of this contract.*

Applicant’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use:

Work Order # \_\_\_\_\_ Date: \_\_\_\_\_

Meter Reading: \_\_\_\_\_ Completed By: \_\_\_\_\_