



*St Marys Water Department*

*418 Osborne Street*

*St Marys, GA 31558*

*912-510-4000 PH*

*912-882-5506 FAX*

Attached please find an application for water, sewer and garbage collection for the City of St. Marys. Please provide this information before arriving in St. Marys so that your service will be active upon your arrival.

1. Deposit in the amount of \$175.00 (\$100 refundable water deposit; \$75.00 non-refundable garbage administration fee) by means of Cash, Check, Money Order or Credit Card Information Slip completed (see slip below). Completed application with date you desire service to be activated.
2. A clear copy of your Driver License. **Please do not fax the copy because it will not come through clear.** You may bring your ID by City Hall within 2 weeks of your activation date to keep service on.

Should you have any questions, please feel free to give me a call at the above number.

Thank You,  
Customer Service

DATE: \_\_\_\_\_

AMOUNT: \_\_\_\_\_

NAME ON UTILITY APPLICATION: \_\_\_\_\_

NAME ON CREDIT CARD: \_\_\_\_\_

TYPE OF CARD: \_\_\_\_\_

*(VISA, MASTERCARD or AMERICAN EXPRESS)*

CARD #: \_\_\_\_\_

3 DIGIT CODE ON BACK OF CARD: \_\_\_\_\_

EXPIRATION: \_\_\_\_\_

SIGNATURE OF CARD HOLDER: \_\_\_\_\_

INITIALS OF WATER DEPARTMENT ACCEPTING APPLICATION: \_\_\_\_\_



**APPLICATION FOR WATER, SEWER & GARBAGE SERVICES**

ST MARYS WATER & SEWER DEPT.

418 OSBORNE STREET

ST. MARYS, GEORGIA

Phone: 912-510-4000 Fax: 912-882-5506

I hereby make application to be supplied with Water & Sewer Service from the City of St. Marys Water & Sewer Distribution System on a meter basis at the following address. Your acceptance of this application is subject to the approval of your engineers.

Name (Please Print): \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Social Security #: \_\_\_\_\_ DL State & #: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Spouse/Roommate: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Social Security #: \_\_\_\_\_ DL State & #: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Date & Address of previous service with City of St. Marys: \_\_\_\_\_

Military Command/Department: \_\_\_\_\_

PLEASE READ CAREFULLY

I agree to take and pay for such water & sewer service in accordance with the schedule of rates and regulations of the City, now or hereinafter in effect.

I hand you herewith a **\$175.00 (\$100 refundable water deposit; \$75.00 non-refundable garbage administration fee)** for utilities that will remain with the City. \$100.00 is refundable towards your account after one (1) year of service with no late fees during the last 12 months. If the account appears on the disconnect list after the deposit has been applied to your account, you will be required to bring in another \$100 deposit to the City which will remain on the account until the service is disconnected.

**Failure to receive a bill does not relieve me from my obligation to pay the bill by the due date. Due date is always on the 20<sup>th</sup> of the month excluding weekends or holidays, in which case the due date would be the following business day.** The City of St. Marys does not check postmarks on payments received by mail, nor do we accept post-dated checks.

**WATER METERS ARE CITY PROPERTY AND MAY ONLY BE TURNED ON OR OFF BY CITY WATER DEPARTMENT EMPLOYEES. A \$100.00 (One-hundred dollar) TAMPER FEE WILL BE CHARGED TO YOUR ACCOUNT IF THE METER IS TAMPERED WITH.**

**Customer Signature:** \_\_\_\_\_

**Spouse/Roommate Signature:** \_\_\_\_\_

**Effective Date of Service:** \_\_\_\_\_